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The objectives of the project were to determine the quantitative need of medical record technicians, to develop a curriculum, and to explore hospitals to be used for clinical experience. Five hundred and three hospitals assumed to be representative of the 7.127 listed by the American Hospital Association responded to a questionnaire. Projected data indicated that 18,304 persons were employed as medical record technicians and that by 1975 there would be a need for 9.810 more. The 2-year curriculum developed on the basis of the hospitals' suggestions consists of medical records science courses dealing with historical aspects, filing, classification systems and coding methods, ethical and legal aspects, specialized responsibilities, principles of organization and management, medical terminology, and machine transcription, general studies course including English, economics. American government, anatomy and physiology, psychology and human development, other required courses including data processing, computer program, typing, speech, and statistics, and 9 credit hours of electives. A simulated medical record room was developed and actual clinical experiences in large metropolitan and smaller local hospitals were arranged. The report also includes guidelines for curriculum development: the appendix includes survey results, course outlines, a sample hospital contract, a description of summer clinical experience, and a list of cooperating hospitals. (JK)



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FINAL REPORT
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A COMPREHENSIVE PROJECT TO DEVELOP A COMPLETE CURRICULUM IN THE AREA OF MEDICAL RECORDS TECHNICIAN

February 1968

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

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Final Report

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A COMPREHENSIVE PROJECT TO DEVELOP A COMPLETE CURRICULUM IN THE AREA OF MEDICAL RECORDS TECHNICIAN

Including Guidelines for the Development of a Two-Year Collegiate Curriculum for Medical Record Technicians

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Division of Health Technologies

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Alfred, New York

February, 1968

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U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

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SUMMARY

In the light of recent indications of the great needs in the field of Medical Record Technology for qualified personnel and the dearth of accredited programs to educate and train persons for the field, this project was developed. The objectives of the project were (1) to carry out a nationwide study of needs in the field of Medical Record Technology; (2) to develop a curriculum for Medical Record Technicians; and (3) to explore possible hospitals to be used as part of an "extended campus." It was hoped that this broad spectrum approach to the problem would result in a set of guidelines which could be used by other twoyear colleges in the development of similar programs regardless of their geographic location. Part of the problem associated with such a curriculum in the Health Technologies is the need for laboratory experiences in cooperating hospitals, whereby the students may receive practical experience under the supervision of qualified faculty and hospital personnel. Geographical location, therefore, becomes a problem. A college situated in a rural setting does not have the wealth of hospital resources upon which to draw for laboratory experiences. Therefore, it becomes necessary for the program to be developed in such a way that the students have these experiences incorporated into the program during a summer session or are transported to the clinical facilities during the regular school year.

The study of national needs incorporated the findings from 503 hospitals representing each of the fifty states of the United States. The findings indicate a projected need for an increase of 29% over present personnel. This represents 5,248 additional medical record technicians. By 1975 the need appears to be an increase of 54% or 9,810 additional personnel.

Associated with the question of personnel needs was the question of the course inclusions which would best prepare the graduates for maximum efficiency in the field. Results include the various courses specified and the percentage of hospitals indicating the inclusion of each course. Working from these data and the requirements of the college for general education courses, a curriculum was developed. The program includes a balance between the general education and technology areas. Course descriptions, course objectives, and course outlines were developed for each of the Medical Record Science courses. Furthermore, inasmuch as the need for students working with patient medical records is such an important part of the program, hospitals throughout the United States were requested to submit medical record forms and copies of actual patient medical records with identifying characteristics deleted. To provide a laboratory for the program, a simulated medical record room was developed which is 35' by 37' in size and is equipped with the various files, open files, typewriters, transcription machines, calculators, patient and address files, work tables, and desks similar to that which would be found in a hospital. This provides the opportunity for students to gain



the basic techniques and experiences necessary for productive work in a functioning hospital medical record department. This prepares the student without having them interfere with an active record department. Following this preparation they are ready for the summer experience in a cooperating hospital where they work with the rest of the personnel and are employed by the hospital. The summer affiliation program is directed by both the college faculty and the cooperating hospital record personnel. The summer experience is confined to a large metropolitan hospital with an excess of 10,000 annual patient discharges. In the senior year the students are transported to nearby smaller cooperating hospitals so they will be acquainted with the diversity of duties required of these personnel.

Guidelines have been developed and follow closely the format established by the Education and Registry Committee of the American Association of Medical Record Librarians entitled, GUIDELINES FOR THE DEVELOPMENT OF MEDICAL RECORD TECHNICIAN PROGRAMS IN JUNIOR COLLEGES.

Throughout the study, close cooperation was given by the American Association of Medical Record Librarians, the New York State Association of Medical Record Librarians, the Rochester Regional Health and Hospital Council, and many hospital medical record librarians.

INTRODUCTION

In the early 1960's, it became more and more apparent that the modern trends in scientific advances, coupled with the increasing population, dictated the need for a more thorough and competent means of technical education in the health professions. Nineteen hundred sixtyfour was a noteworthy year for New York State inasmuch as this marked the first intensive examination of the health professions by a statesponsored organization. The Community College Health Careers Project was inaugurated under the aegis of the Board of Regents of the University of the State of New York and was financed during its first phase by the W. K. Kellogg Foundation. The object of this project was to determine how best the two-year colleges could meet the training needs for increased health profession personnel. It had become apparent that, whereas most health technologies had had their educational program centered in hospitals, it was becoming less and less efficient due to the increasing demands on hospital facilities by the increased numbers of persons who were hospitalized for medical treatment. The two-year college with its diversified resources and teaching personnel, plus the fact that these colleges are widespread throughout the State and have available to them a multitude of clinical facilities, seemed to be the most likely educational institution to which the health professions should turn for this extended educational program.

The State University of New York Agricultural and Technical College at Alfred became involved in the Community College Health Careers Project, both in advisory and technical capacities. The college administration indicated to the Project that it would be interested in establishing a pilot program in the field of Medical Record Technology. At that time, there were four two-year colleges in the United States who were registered with the American Association of Medical Record Librarians as offering a two-year program in Medical Record Technology. In addition to these four two-year colleges, there were nine hospital-based programs of one-year duration which were admitting students. Therefore, the total number of programs available to interested persons in the United States numbered thirteen. Inasmuch as the need for medical record technicians seemed to be urgent, it was indeed evident that the number of programs available to prepare persons for this field was totally and markedly inadequate.

It was the feeling of the concerned personnel in the Health Technologies Division of this college that in order to establish a curriculum
which would truly meet the needs of the profession, it would be necessary
to approach the development of this curriculum from the point of view of
the people in the field who truly know what the needs are. It was decided to seek assistance from hospital personnel throughout the United
States as to the type of curriculum they felt would be most beneficial



in preparing people to act as medical record technicians. The plan was to obtain their counsel and to add this technical and practical approach to the basic educational needs that would be required to develop a well-rounded curriculum which would have a balance between the technical courses and general education courses.



METHODS

With this background in mind, this project was developed with three main objectives. First, to carry out a nationwide study of needs in the field of Medical Record Technology; second, to develop a curriculum for medical record technicians; and third, to explore possible hospitals to be used as part of an "extended campus." It was hoped that this type of broad spectrum approach to the problem might result in the development of a set of guidelines which could be used by other two-year colleges in the development of similar programs regardless of their location. One of the problems that exists with many two-year colleges is their geographical location with regard to hospital-clinical facilities. Inasmuch as the nearest large metropolitan hospital is seventy-five miles from the Village of Alfred and the college campus, it was felt that if a curriculum could be developed that would be functional, this would allow any college to develop a similar program without the lack of nearby clinical facilities being a deterring factor. This report will be given in terms of the three objectives stated above.

I. To Carry Out a Nationwide Study of Needs

The procedure planned was to survey hospitals throughout the United States to gain their reactions to a two-year medical record technician curriculum and to determine their anticipated employment needs in this area over the next five years. The survey was to be as follows:

- a) Not to exceed sixty hospitals in the states of Maine, Vermont, New Hampshire, Massachusetts, Connecticut, Pennsylvania, Rhode Island, and Maryland.
- b) Ten hospitals each as a sample representation from each of the other forty-one states, excluding New York.
- c) Three hundred hospitals in New York.

The actual procedure carried out was as planned in parts b) and c); part a), the number of hospitals contacted for each state, was as follows:

Connecticut	64
Maine	41
Maryland	56
Massachusetts	60
New Hampshire	7
Pennsylvania	55
Rhode Island	25
Vermont	22

To each of the hospitals was sent a questionnaire (Appendix I) designed to gather data concerning present employment, future employment, salaries, hours of work, accreditation or licensing requirements, background of present medical record technicians as far as education is



concerned, the average length of retention of medical record technicians and the hospitals' suggestions as to college courses they felt would be desirable for medical record technicians. One thousand and sixty hospitals were contacted and of these, 503 responded to the inquiry. An analysis of the findings will be found in Appendix II. The analysis by control groups may be seen in Appendix VII. The hospitals responding are classified according to the control groups established by the Guide Issue of the Journal of the American Hospital Association listing of hospitals and are given below:

CLASSIFICATION CODES

Governmental, non-federal	Voluntary, non-profit
12 - State 13 - County 14 - City	21 - Church-related or operated 23 - Other non-profit
<pre>15 - City-county 16 - Hospital district</pre>	Governmental, federal
Proprietary	41 - Air Force 42 - Army
31 - Individual32 - Partnership33 - Corporation for profit	43 - Navy 44 - Public Health Service 45 - Veterans Administration 46 - Other federal

II. To Develop a Curriculum for Medical Record Technicians

A. Collegiate and Professional Association Involvement:

The procedure called for a visit to East Los Angeles College in Los Angeles, California, and St. Mary's Junior College in Minneapolis, Minnesota, where two of the then-existing medical record technician curriculums were in operation. The purpose was to discuss the programs with the directors of these curriculums and to seek their counsel in establishing guidelines which might be applicable to a program such as the one anticipated at this college. A further plan was to work with the Community College Health Carea s Project of the New York State Department of Education and participate in their Teacher Training Program which was established at the State University of New York at Buffalo through the School of Health Related Professions. Furthermore, the plan was to attempt to complete the study and curriculum planning in time that the college would be able to initiate a pilot program for the Community Colle Health Careers Project and the State Education Department by September, 1967.

The principal investigator met with Mrs. Lea Tupper Davidson, R.R.L., Coordinator, Medical Record Technician Program, East Los Angeles College and with Miss Sandra E. Williams, R.R.L., Director, Medical Record Technician Program at St. Mary's Junior College. These people were extremely

helpful in the study, since they discussed the format they had followed for their curriculum development and also explained, in detail, the type of program that was being offered at their respective colleges. Subsequently, a meeting was held with Miss Laura Anne Biglow, R.R.L., Chief, Education Program, American Association of Medical Record Librarians in Chicago. At this time, the intent of the development of the curriculum on the Alfred campus was discussed and the format that was to be followed in the development of the curriculum was examined by Miss Biglow. Her contributions were most beneficial, since they included the necessary program requirements established by the American Association of Medical Record Librarians for eligibility for accreditation by the Association. The significance of such accreditation is that an institution is then eligible to have its graduates take the accreditation examination established by the Association. Successful completion of this examination by the graduate results in their becoming an Accredited Record Technician and they are eligible to add the initials, A.R.T., to their name as proof of their high qualifications.

In addition to the assistance gained by visits to the above-named institutions and organizations, the college worked closely with the Rochester Regional Health and Hospital Council, Inc. in Rochester, New York. Mrs. Helen T. Culian, R.R.L., a Medical Record Consultant for the Regional Council, was most helpful in guiding the curriculum development and the planning that took place.

B. College Faculty Involvement:

In order for an educational curriculum to be well founded, it is necessary that the faculty who will be involved in the teaching of the program be consulted in its development. As a result of the Teacher Training Program of the Community College Health Careers Project, we were able to enlist the services of Mrs. Eleanor McMurray who had been the Chief Medical Record Librarian at Glens Falls Hospital in Glens Falls, New York. She joined the faculty of the college in December and entered the Teacher Training Program at the State University of New York at Buffalo in January. As part of this program, she worked closely with the college Health Technologies Divisional Chairman and Medical Services Department Chairman in developing the actual curriculum for the new Medical Record Technology Program. Of invaluable assistance to her as a consultant was Mrs. Annette Unfried Buhsmer, R.R.L. Mrs. Buhsmer has had both considerable experience as a practicing Medical Record Librarian and as a teacher on the Alfred campus in the Business Division. Mrs. McMurray and Mrs. Buhsmer met regularly to determine the objectives for each of the Medical Record Science courses, as well as the course outlines and procedures that would be followed. The course objectives, descriptions, and outlines for the Medical Record Science courses will be found in Appendix III.

C. Advisory Committee Involvement:

Throughout the planning phases of the Project and the development of the course outlines, an Advisory Committee was consulted regularly.



This committee consisted of:

Mrs. Helen Culian, R.R.L., Consultant Rochester Regional Hospital Council Rochester, New York

Sister Mary Rene, Administrator St. James Mercy Hospital Hornell, New York

Miss Carol Dodds, R.R.L., Head Medical Record Department St. James Mercy Hospital Hornell, New York

Mr. Orlando Puozzoli, Administrator Jones Memorial Hospital Wellsville, New York

Mrs. Annette Buhsmer, R.R.L. Wayland, New York

The Advisory Committee was kept informed of the procedures that were being followed and their advice was sought as to the most effective ways to implement the objectives of the study.

The guidelines, as established by the American Association of Medical Record Librarians, include the need for considerable clinical experience on the part of the students during their training program. A definite problem that is associated with the development of any curriculum that includes clinical or hospital experiences when the college is situated in a rural area is one of establishing a means whereby students can receive the type of training that would be possible where adequate clinical facilities are available. After reviewing the existing programs and consulting with the national association, it was decided that it would be best to plan a simulated Medical Record Department as part of the college laboratory. This has been designed and consists of a room 35' by 37' which is used as a laboratory for the Medical Record Science courses. The laboratory contains open shelf filing, drawer files, card index files, calculators, typing desks, secretarial desks, electric and manual typewriters, visible files, work tables, and other equipment. Inasmuch as it is necessary that students work with actual patient medical records, hospitals throughout the United States were contacted and asked to contribute copies of patient medical records and medical record forms. The names of the patients, attending physicians, nurses, and relatives were deleted from the records before being introduced into the laboratory. The present collection consists of approximately 2,500 patient medical records and are used by students for filing, statistical analyses, examination for completion and all other procedures involving such patient information. In addition to this



simulated laboratory providing a place for the students to work when there is a lack of adequate clinical facilities in the geographical area, it also provides a laboratory where they can learn the various procedures associated with their technology without involving the time and space of an active medical record department in a hospital. When examining existing medical record departments in both large and small hospitals, invariably one finds that the physical space is less than adequate for the daily functioning of the department and the addition of students into an already crowded set-up adds an unnecessary handicap to the hospital personnel. It was felt that it would be much more effective to have the students learn their basic procedures in the college laboratory and then to develop an "extended campus" which would consist of cooperating large metropolitan hospitals. Here the students would be in a full workaday environment and would be able to carry out the techniques they had learned on campus.

III. To Explore Possible Hospitals to be Used as Part of an "Extended Campus"

In light of the need for actual clinical experience on the part of medical record technicians, it was felt that after a period of learning which would take place in the college simulated medical record department laboratory, the students should have an opportunity to gain actual work experience in hospitals. It was determined that a program would be developed whereby the students would work in a hospital medical record department for a ten-week period between the first and second academic years of their collegiate program. The selection of hospitals that would be contacted in this program would be limited to those in the metropolitan areas of Buffalo, Rochester, Svracuse, and Binghamton, New York, and would be those which had in excess of 10,000 patient discharges annually. rationale for this selection was that these are the geographical areas which would best meet the needs of the students with regard to their home locations and secondly, would also provide the extent of medical record department complexity which should give the student the best type of allround experiences. When visiting the hospitals, the college prepared a contract for this summer affiliation which is included in Appendix IV. Within the contract, it is tipulated that the college will prepare the students for summer affiliation in such a way that they will be readily able to be of service to the hospital and ready to receive the additional instruction associated with this type of experience. A description of the summer affiliation can also be seen in Appendix V. Insofar as these provisions do not interfere with the normal functioning of the medical record department, the hospital agrees to provide experiences for the students in the following areas:

- A. Filing and handling requests.
- B. Admission procedures.
- C. Discharge analysis and statistics.
- D. Coding and indexing--sample research project, if possible.
- E. Transcription.
- Miscellaneous duties as needed for substitution for absentee employees.



It will be noted that this cooperative endeavor begun between the college and the hospital involves the actual hiring of the students by the hospital during this ten-week summer period. The monetary renumeration to be received by the students was agreed to be the New York State minimum wage in existence at the time of the cooperative program. The consensus of the hospital administrators and medical record librarians involved was that the type of preparation these students would have received prior to their employment would well qualify these students to receive a salary during their work experience. The feeling was that the salary should be at the existing state minimum wage, since this would place all hospitals in the position of having the same base salary and would not involve any competition between the hospitals for student selection. It was felt that there would be two main advantages to having the students employed at a salary during this summer period. The first would be that the students would then have a sense of "belonging" to the hospital staff and would give greater importance to the work which they were doing. This would take their experience out of the realm of roleplaying and would provide them with a sense of responsibility that could not be achieved were this to be merely a clinical experience. The second factor that is important in establishing this type of relationship is that the students usually need to be employed during the summer to aid in the financial expense incurred in the regular college year. By providing opportunity for employment along with the learning experience, the student would not be financially jeopardized during this ten-week period.

The discussions with these metropolitan hospital personnel resulted in fifteen hospitals cooperating in this program and, at present time, contractual arrangements have been made with them for the summer of 1968. A list of the cooperating hospitals is given in Appendix VI.

Although the summer experience in metropolitan hospitals provides for a major phase of the hospital learning experience, it is necessary that the students be provided with an opportunity to acquire additional clinical experience during their senior year. Present plans include developing a cooperative program with six area hospitals whereby the students will participate in the following types of experiences: developing statistical reports; coding and indexing; handling research problems; medical abstracts and correspondence; and preparation of medical records for subpoena.

The six area hospitals are situated in communities other than Alfred, New York, and, therefore, the problem of transportation of students from the college to the clinical facilities would appear to be a problem. However, the college has provided a solution to the situation in that busses are utilized to transport students. The college owns and operates busses which are equipped with an elaborate sound system including individual headphone sets for each student and microphones for each four students. With this system the students and instructors are able to carry on discussions and prepare for the particular clinical experience of the day. On the return trip it is possible for the students to share



experiences and to discuss what has been learned and problems which have been encountered. The same audio system is used in the nursing program where the pre and post conferences are held on the bus. The system has been working well and should provide a supplementary service to the medical record program.

It is felt that the combination of the summer experiences in large metropolitan hospitals plus experience during the senior year in smaller local general hospitals will provide a well-rounded hospital experience in all phases of medical record practice.

IV. Development of Guidelines

It was hoped that this broad spectrum approach to the problems associated with the development of a medical record technician curriculum might result in the development of a set of guidelines which could be used by other two-year colleges for similar programs, regardless of their geographical location.

As a result of this study, the consensus is strong that, although we are interested in preparing students for careers in the field of Medical Record Technology, we must also take into consideration the fact that their total educational development must be included in the curriculum. Therefore, the recommendation is that a Medical Record Technician curriculum should be so designed as to meet the requirements for an Associate Degree and should be developed as a two-year collegiate program.

A program for Medical Record Technicians, in order to be practical and functional, should be developed in cooperation with the college and the local and national associations of Medical Record Librarians. With this in mind, we have worked closely with the American Association of Medical Record Librarians and the New York State Association of Medical Record Librarians and have sought their guidance and assistance throughout. The guidelines being presented follow very closely those prepared by the Education and Registration Committee of the American Association of Medical Record Librarians, "... for the development of the Medical Record Technician Programs in Junior Colleges." The major changes deal with the placing of the program on a collegiate campus as opposed to the program being developed as an affiliate program of a teaching hospital. The guidelines established are found in the Results and Findings of this report and begin on Page 13.



RESULTS AND FINDINGS

I. Needs

In the 1965 Guide Issue of the Journal of the American Hospital Association, 7,127 hospitals were listed. The 503 hospitals who responded to the questionnaire represented 7.06% of the hospitals in the United States. Since these were chosen at random, it is assumed that they are representative of the hospitals in the country. Projecting from these data, we find that presently there are 18,304 persons who are employed in the capacity of a medical record technician. Further projection indicates that by 1969, there will be need for an additional 5,248 medical record technicians, or an increase of 29% over present figures. By 1975, there will be a need for 9,810 additional medical record technicians, indicating an increase of 54%. These data merely re-emphasize the tremendous need indicated by medical record personnel in the field. One of the major concerns of the American Association of Medical Record Librarians, and also of various local medical record librarian organizations, is the lack of educational programs designed to prepare qualified medical record technicians.

II. Suggested Course Inclusions

As noted in the questionnaire, hospitals were asked to react to a variety of courses that were suggested for inclusion on a medical record technology curriculum. The result of these reactions is as follows:

		Percent of Hospitals
	Course Title	Suggesting Inclusion
1.	Filing	94%
2.	Anatomy and Physiology	92%
3.	Typing	85%
4.	Business Law	85%
5.	Medical Terminology	63%
6.	Office Machines	52%
7.	Mathematics	59%
8.	Data Processing	48%
9.	Accounting	43%
10.	Manual Shorthand	37%
11.	Machine Shorthand	15%
12.	Machine Duplication	12%

These are specialty courses particularly related to the field and do not include those general education courses which would normally be included in a collegiate program such as English, Social Sciences, and Psychology.



III. Curriculum

Using the above data as supportive evidence and practical indications of the type of curriculum which would best meet the needs of the field, the principal investigator, along with the Chairman of the Medical Services Department and faculty person who would be directing this new curriculum, developed a curriculum which is based on the Guidelines established and which meets the requirements of the State University of New York with regard to General Education. The curriculum is shown in the Guidelines on Pages 17 and 18 in terms of the overall description and in terms of a quarter by quarter display. Although the curriculum is new and being tested for the first time this year, the sequence of courses seems to be well developed and logical.

IV. Guidelines for the Development of a Two-Year Collegiate Curriculum for Medical Record Technicians

A. Definitions

1. Credit Hour--Three hours of student time involvement per week. This may consist of one hour of lecture and two hours of preparation; a three-hour laboratory with no outside preparation time, or a two-hour laboratory and one hour of lecture, or the combinations of lecture, laboratory, and preparation amounting to three hours of time. It should be realized that the three-hour time involvement might well vary with the abilities of different individuals.

A credit hour for the work-study phase of the curriculum is defined as being equivalent to approximately 60 hours of supervised work-study experience in a cooperating hospital.

- 2. Laboratory Experience—The learning experience carried on in the laboratory either on the college campus or at the clinical facilities. By laboratory, this would refer to a collegiate laboratory in any of the sciences; learning experiences carried on in a simulated medical record room on campus; or learning experiences conducted in a medical record department or any of its branches in a hospital. This includes that phase of a program which has often been referred to as directed practice.
- 3. Work-Study Experience--That learning experience carried on in the hospital when the student is employed by said hospital and would usually take place during a summer session between the first and second years of the Medical Record Technician Program.
- 4. Cooperating Hospitals—Those hospitals which have been selected to participate in the Medical Record Technology Program and who have indicated the desire to cooperate with the program for this type of instruction.



- 5. Associate Degree--Any of the Associate Degrees conferred by two-year or four-year institutions such as Associate in Arts, Associate in Science, or Associate in Applied Science.
- 6. Two-year College--An accredited college so designed to prepare students for an Associate Degree within a two-year period.

B. Technical Course Content

The technical courses are established in light of the requirements of the essentials for Medical Record Technician schools as put forth by the American Medical Association and the American Association of Medical Record Librarians. Those courses involving both lecture and laboratory should be carefully formulated so as to integrate the laboratory experiences with the theoretical instruction in the formal lectures. The laboratory experiences in the Medical Record Science course should provide practical learning experiences of sufficient quantity and scope to prepare the student for active participation in the performance of technical duties in a Medical Record Department. Repetitive activities which do not advance the learning of the students should be avoided.

		Credi	t Hours
	<u>Course</u>	Sem. Cr.	Qtr. Cr.
-1	Medical Record Science		
ESSENTIAL	Lecture Laboratory Work-Study Medical Terminology	10 6 4 3	15 9 6 5
	Anatomy and Physiology (incl. laboratory) TOTAL	4 27	<u>6</u> 41
ED	Data Processing	3	5
STRONGLY	Statistics	2	3
STRONGLY RECOMMENDED	Typing TOTAL	4 9	<u>6</u> 14



C. Faculty

The director of the Medical Record Technology curriculum should be a Registered Medical Record Librarian with a minimum of three years experience, regularly appointed to the faculty of the college, in accordance with usual procedures for faculty appointment. Additional instructors with experience in Medical Record Science, who meet the requirements of the college, may be appointed also, full-time or part-time. College faculty should be sufficient in number to give a faculty-student ratio that is comparable to on-going programs in the institution.

D. Cooperating Hospitals

Hospitals selected to participate in the Medical Record Technology Program should be general hospitals accredited by the Joint Commission on Hospital Accreditation. The Medical Record departments should be well organized under the direction of a qualified Medical Record Librarian with sufficient staff to provide adequate supervision of students. The general direction of the hospital-laboratory experience should be determined coperatively by the Head of the Medical Record department of the hospital and the Director of the College Program who would be a registered Medical Record Librarian.

Hospitals chosen for the major part of the clinical experience should be large enough to provide a variety of medical care services and to provide the various kinds of practical experience required for the Medical Record Technology students. This usually would be a hospital with a minimum of 4,000 patient discharges per year. Medical Record departments chosen should provide an opportunity for student learning experiences in all phases of medical record technician work i.e., stenographic pool experience; quantitative analysis of medical records, hospital statistics, and reports; coding and indexing of diseases and operations; preparation of medical correspondence and medical abstracts; filing of medical records and reports; admitting office experience; and preparation of medical records and reports for adjunct departments, such as X-ray, laboratory, and clinical and surgical pathology. If feasible, laboratory experiences in both large and small hospicals might well be included.

E. Organization of Program

In addition to the technical specialty courses, sufficient general education and related courses would be taken to meet the college requirements for the appropriate Associate Degree.



F. Curriculum

The curriculum should be an integrated program consisting of both lecture and laboratory experiences. The laboratory experiences should be developed so they can utilize both college laboratory and cooperating hospital facilities. The laboratory phase of the program should be a true learning experience for the students throughout the two years. It is necessary that the lecture material be closely related to the laboratory work so the students realize that the theory discussed in lecture is applied in the actual laboratory experience. College laboratory facilities, if designed as a simulated hospital medical record department, will provide an opportunity to learn basic procedures and to begin to develop a certain degree of facility in handling the various records, forms, and techniques associated with the hospital program. It is significant to realize that the students must be well prepared in their basic techniques prior to participating in the hospital phase of the laboratory program. The hospital phase should be used for those learning experiences which cannot be effectively carried on in the simulated record room on the college campus. The hospital program should not be used as a place where basic elementary techniques are introduced. Insofar as possible, the laboratory experience in the hospital should be similar to that which would be encountered in the regular routines of the medical record department. Attention should be given to the construction of both the college and hospital laboratory phases of the program to insure that sufficient time is available for adequate learning to take place.



MEDICAL RECORD TECHNOLOGY

		Maj	Major Field	te 1d				Gene	General Studies				Others
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MRS.	103	• •	. Rec	Rec. Scf.	H. I		Eng.	103	English I		Data	253	Data Processing I
(3,	203		. Rec.	2. Sc		I	Eng.	203	English II		Data	414	Computer Program
MRS.	303		l. Rec.	c. Scf.	_	III	Eng.	303	English III		MSD.	101	Orientation
MKS.	216		. Rec	Rec. Sci.	i. I	Λ	S.S.	403	Prin. of Econ.		**Sec.	182	Typing I
MRS.	402		. Rec	2. Sc.	i. V		S.S.	503	American Gov't.		Sec.	282	Typing II
MRS.	505		. Rec	Sc.	i. V	Н	S.S.	603	Intern'1. Relations	ons	Sec.	382	Typing III
MRS.	605		. Rec	Sc.	1. V	Med. Rec. Sci. VII	Bio.	404	Anat. & Physiol.	I	Spch.	312	Speech
MRS.	113		. Ter	ulino	logy	and	Bio.	504	Anat. & Physiol. II	II	Math.	513	Statistics
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MRS.	312		Med. Machine	hine			Psych.	223	Human Development	ىد:	**High s	choo1	**High school record determines
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hospital Medical Record Department during the summer quarter between the first and second years. This will be supervised by the hospital and the college. Students will be given a list of the hospitals and and a certain degree of selection will be available.

ENTRANCE REQUIREMENTS

Typing would be helpful but not required

One year Biology One year Math

GRADUATION REQUIREMENTS

- 1. Minimum total credit hours 98
 2. Minimum cumulative index 2.0
 - 2. Minimum cumulative index 2.0 3. Departmental recommendation

MEDICAL RECORD TECHNOLOGY

		First Year				Second Year	
FIRST	QUA	RTER		FOURTH	QUA	RTER	
MRS.	103	English I Med. Rec. Sci. I Typing I	3 3 2	S.S. MRS. Data	405	Prin. of Econ Med. Rec. Sci. V Intro. to Info.	3 5
		Anat. & Phys. I Med. Terminology	4	D 1		Processing	3
MSD.	101	Orientation	3 1	Electi		Gen. Psychology	3 3 2
P.E.	101	Phys. Ed.	16	P.E.	401	Phys. Ed.	16
SECONI	O QU	ARTER		FIFTH	QUAR'	rer	
MRS. Sec. Bio.	203 282 504	English II Med. Rec. Sci. II Typing II Anat. & Phys. II Med. Terminology &	3 3 2 4	MRS. Data	505 254 223	American Gov't. Med. Rec. Sci. VI Intro. Comp. Prog. Human Development Phys. Ed.	3 5 4 3
P.E.	201	Mach. Transcription Phys. Ed.	3 15			•	15
THIRD	QUA	RTER		SIXTH	QU A R'	ΓER	
MRS. Sec. Math. MRS.	303 382 513 312 Eve 301	English III Med. Rec. Sci. III Typing III Statistics I Med. Machine Transcription Phys. Ed.	3 2 3 2 2 2 15	S.S. MRS. Spch. Election	605 312 ves	Intern'l. Relations Med. Rec. Sci. VII Speech Phys. Ed.	3 5 2 5 15
MRS.	216	Med. Rec. Sci. IV	6				
First	Year	r Credit Hour Total	52	Second	Year	r Credit Hour Total	46

*Students proficient in this course, based upon their high school record, will elect another course in its place.



G. Recommendations for Non-Technical Courses

The Associate Degree Program permits a wide choice of general education courses for the enrichment of the individual. Each college would determine the required and elective general education courses. These elective courses could include such areas as: Data Processing and Computer Programming, Statistics, Speech, Psychology, Social Sciences, and Literature. It would be strongly recommended that, if Data Processing and Computer Programming courses are available, these be included in the basic curriculum.

The division of general education and technical courses might be on the basis of 40% to 45% general education subjects and 55% to 60% science and technical subjects.

H. Major Considerations

- 1. The Director of the Medical Record Technology Program should be an experienced registered Medical Record Librarian.
- 2. The program director should plan and coordinate an effective hospital laboratory program with directors of cooperating hospital medical record departments.
- 3. Evaluation of the total program should be an on-going process under the guidance of the director of the program. This should include evaluation of the effectiveness of the hospital laboratory experience as well as the acceptability of the cooperating hospitals.
- 4. A joint Program Advisory Committee, composed of both representatives from the college and from some of the cooperating hospitals, is highly recommended.
- 5. If adequate clinical facilities are not readily available in the immediate environment of the college, it may be necessary to plan a simulated medical record department in the college laboratory, and to design a work-study program during the summer session to enable the students to have an opportunity to receive the necessary clinical experience, and to provide for additional clinical experiences during the senior year of the program.

I. Suggestions for Planning

1. The entire Medical Record Technology program, lecture and laboratory experiences, should be planned to operate within regular school sessions or summer sessions.



- 2. Summer sessions may be utilized for hospital-laboratory experiences when necessary. However, if Associate Degree Programs are properly planned, there should be no need to use two summer sessions.
- 3. Assuming some students may wish to continue study toward a Baccalaureate Degree, consideration should be given to include those liberal arts and science courses for which credit might be transferred to a four-year Medical Record Science Program.

The Associate Degree Program should provide a complete course in Medical Record Technology for one who wishes immediate employment in a medical record department of a hospital or clinic (under the supervision of the medical record librarian), as well as providing consideration for the student who desires to transfer to a Baccalaureate program in Medical Record Science.

These guidelines follow very closely those prepared by the Education and Registry Committee of the American Association of Medical Record Librarians entitled, GUIDELINES FOR THE DEVELOPMENT OF MEDICAL RECORD TECHNICIAN PROGRAMS IN JUNIOR COLLEGES.



CONCLUSION

The study shows an overwhelming national need for the preparation of increased numbers of persons to fill the role of Medical Record Technician. Furthermore, there is definite need for programs which will be designed around the technical needs of the field as well as being "well rounded" with regard to a general education.

The advantages of developing such a curriculum on a two-year college campus, as a part of the regular offerings in the health technologies, The students have the opportunity to gain from the association with other students in academic programs other than Medical Record Technology, and have the opportunity of exchanging ideas and concepts which add to the general education value of a collegiate program. other major advantage to the location on a college campus is that the students may learn the basic skills and understandings of their technical field without taking up much needed space in a working hospital and without interfering with the on-going functioning of a busy Medical Record department. Furthermore, it is possible to provide a uniform education to more students than would be possible in most hospital situations. The number of students can be divided over a variety of clinical facilities for the clinical experience needed while the basic skills and general education courses can be taken in larger groups on campus. The cost of the program is divided over a number of academic areas at the collegiate level whereas the cost of the total program must be absorbed by a single hospital if the program is hospital based and the lower number of students then make the individual student cost for the program disproportionately high.

When a Medical Record Technology curriculum is proposed for inclusion in a two-year college setting, the college administration must take into consideration the need for adequate clinical facilities for the laboratory experience. If the college is located in a metropolitan area with several hospitals preparation must be made well in advance for seeking the cooperation of the hospitals in the development of an "extended campus." Care must be made to select hospitals which are large enough to provide a wide variety of experiences for the students and which have qualified personnel in the Medical Record department. If the hospitals are close by and easily accessible to the students, the hospital experience may be incorporated into the regular academic year. In the instance where the facilities of the immediate environment are inadequate to meet the total needs of the number of students in the program, a summer phase may be developed where the students will gain the major part of their hospital experience between the first and second years of the program. This provides them ample time during the first year to become familiar with the skills associated with the field and to become familiar and proficient with the specialty areas such as coding and indexing, medical terminology, and the wide variety of forms used in the Medical Record department before beginning the hospital experience. There is a two-fold advantage in



developing a cooperative program with hospitals for employing the students during this summer period. One advantage is the student becomes a part of an on-going department and has the psychological advantage of knowing the work they are doing is of importance over and above that of pure education. Secondly, the student is given an opportunity to add to their personal finances and alleviate the economic drain caused by their educational program. This type of a "work-study" program brings the college faculty and the medical record personnel of the hospitals closer together and provides for enrichment of the student's program.

The senior year should also include laboratory experiences in the hospital. This will provide the students with additional opportunity to practice their skills and techniques and put into practice the more sophisticated understandings they study in the senior year of the program. There is an advantage in attempting to have the hospital experiences take place in different types or sizes of hospitals since the diversity of responsibilities will be of benefit to the total learning experience.

To insure the type of cooperation that is necessary to provide the best education for the student, it is imperative that the early planning for a new curriculum include both college educators and medical record personnel who are actively practicing in the field. The most feasible plan is to work closely with the American Association of Medical Record Librarians, the state chapters of the national association, and regional medical record librarian groups. In this way the program can intermesh with the college needs, the hospital needs, the facilities available at both, and take advantage of the wealth of resource material available from the professional associations both in terms of personnel and printed materials.

The curriculum should be developed so it meets the requirements of the American Association of Medical Record Librarians and is eligible for accreditation by the Association so the graduates of the curriculum may take the examination to become Accredited Record Technicians. Information pertinent to this accreditation may be received from the Executive Director, American Association of Medical Record Librarians, 211 East Chicago Avenue, Chicago, Illinois 60611.

Although a two-year college cannot insure that the credits earned in this curriculum will be fully transferable to a four-year Medical Record Librarian curriculum, consideration should be given to the possibility of developing the curriculum so that it is practical to assume that the majority of the program would be transferable, as long as it does not interfere with the primary goal of the curriculum, namely to educate and prepare persons who will be well qualified to carry out the duties of a Medical Record Technician in a hospital.



A P P E N D I X I

HOSFITAL SURVEY QUESTIONNAIRE



Hospital N	ame		
Address			···
Administra	•		
1- Number		1 Record Librarians pr	
2- Number	of Medical Record Te- employe	chnicians (or comparab ed: Total Female	le) presentlyMale
3- Number	of Medical Record Te	chnician positions ant	icipated to exist by: 1969 1975
4- Startin	g salary for Medical	Record Technicians:	
5- Work sc	hedule for Medical Re	ecord Technicians: Weeks per year Days per week Hours per day	
6- Check a Record	t the right, those wi Technicians in your l	hich apply to Medical hospital:	
	Medical Record	ting required American Association d Librarians required l licensing required	
7- Backgrou Indicate followin	e number of technicia	al Record Technicians. ans in each of the	
	High school graduate Less than 2 years po Two-year college gra Four-year college gra	ost high school study aduates	
8- Average Technic	length of retention Lans on the job (in m	of Medical Record months): Female Male	
	courses you feel wou Record Technicians		
Machine Typing Medical	Shorthand Shorthand Terminology nd Physiol.	Filing Data Processing Business Law Mathematics Machine Duplication Office Machines	



APPENDIX II

RESULTS FROM QUESTIONNAIRES RETURNED
BY HOSPITALS COOPERATING IN THE
MEDICAL RECORD TECHNOLOGY GRANT STUDY



RESULTS FROM QUESTIONNAIRES RETURNED BY HOSPITALS COOPERATING IN THE MEDICAL RECORD TECHNOLOGY GRANT STUDY

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APPENDIX III

MEDICAL RECORD SCIENCE COURSE DESCRIPTIONS, OBJECTIVES, AND OUTLINES Medical Record Science I - MRS 103 Credit three hours One lecture, two laboratories per week

An introduction to the history of medicine, the hospital, and the medical record. Discussion of the organization of the modern hospital with emphasis on the medical record department and the medical record profession. Laboratory includes introduction to a simulated medical record department, its organization, and function.

Course Objectives:

- 1. Gain interest in the health field through history of medicine, hospitals, and medical records.
- 2. Orient the student with the modern hospital and its physical facilities.
- 3. Gain an understanding of the role of the hospital in the economic and educational life of the community.
- 4. Develop an understanding of the various types of hospitals, the organization of their medical staffs, and their responsibility for professional evaluation of patient care.
- 5. Instruct the student in the importance of medical record department work in relation to all other hospital departments.
- 6. Gain an understanding of the position of the medical record technician as a member of the health team and of his contribution to better patient care through medical records.
- 7. Learn the general format of the medical record, its importance and usage in the field of medicine and in the hospital for total patient care.
- 8. Acquire a knowledge of the procedures involved in preparing the medical record for permanent filing.
- 9. Gain an understanding of end appreciation for the Medical Record Librarian associations and educational programs.
- 10. Acquire a knowledge and understanding of professional ethics in medicin; and medical records.



Laboratory Objectives:

- 1. Acquaint the student with the facilities of a medical record department.
- 2. Learn the organization of personnel within the medical record department.
- 3. Receive an introduction to the medical record and its contributors.
- 4. Acquire a knowledge of methods used in developing medical record forms.
- 5. Learn methods in preparing admission forms and patients' index cards.



MRS 103 COURSE OUTLINE

I. Orientation

- A. Introduction to philosophy of hospitals
- B. Organization of hospitals
- C. Medical Record Department
 - 1. Definition of medical record
 - 2. Organization of medical record department

II. History

- A. Medicine
 - 1. Development
 - 2. Important men
- B. Hospitals
 - 1. Early institutions
 - 2. American hospitals
 - 3. Standardization and accreditation
- C. Medical Records
 - 1. Early medical records
 - 2. Development

III. The Modern Hospital

- A. Turning point
- B. Functions
- C. Mechanization within departments
- D. Personnel--paramedical professions
- E. Medical staff
 - 1. Types
 - 2. Committees
- F. Classifications
- G. Specialized institutions

IV. Medical Record Department

- A. Functions
- B. Procedures within department
 - Admitting procedures
 - Secretarial procedures



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- 3. Discharge procedures
- 4. Release of confidential information

V. Medical Record Profession

- A. Medical Record Librarian--R.R.L. and C.R.L.
- B. Medical Record Technician--A.R.T.
- , C. Associations
 - 1. AAMRL
 - 2. STATE
 - 3. LOCAL
 - 4. INTERNATIONS ASSOCIATIONS
- D. Education and registrations
 - 1. MRL--schools and seminar refresher courses
 - 2. MRT--schools and correspondence study

VI. Ethics

- A. Definition
- B. Professional and medical ethics
 - 1. Hippocratic oath
 - 2. Confidentiality of medical record
 - 3. Pledge of AAMRL

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Medical Record Science II - MRS 203 Credit three hours One lecture, two laboratories per week

An orientation to various methods of filing and requirements of hospital and accreditation agencies. Discussion of the development and evaluation of the medical record and methods used for compiling statistics. Laboratory includes working with filing systems and medical records.

Course Objectives:

- 1. Acquire a knowledge of the various filing methods used in maintaining and retrieving medical records.
- 2. Develop a recognition of the value of keeping accurate, up-to-date medical records.
- 3. Gain a knowledge and understanding of hospital and accrediting agency requirements and how they affect the medical record.
- 4. Acquire a knowledge of the component parts of the medical record and its sources.
- 5. Develop the skill of analyzing a medical record quantitatively.
- 6. Gain an understanding of the work flow involved in the completion of the medical record.
- 7. Acquire the knowledge of methods and forms used in compiling and reporting statistics for hospital and medical reports.

Laboratory Objectives:

- Develop skill in alphabetic filing.
- 2. Develop skill in numeric filing.
- 3. Develop skill in Soundex filing.
- 4. Develop skill in assembling medical records after discharge.
- 5. Gain experience in assigning service classification.
- 6. Gain experience in evaluating medical records quantitatively.



Laboratory Objectives (cont'd.):

- 7. Develop ability to abstract daily statistics from discharges.
- 8. Acquire knowledge of the formulas used in obtaining statistics for hospital reports.
- 9. Develop skill in methods used in compiling monthly statistical reports.

MRS 203 COURSE OUTLINE

I. Filing

- A. Introduction
 - 1. Necessity and use
 - 2. Types (alphabetical, numerical, combination)
- B. Organization
 - 1. Centralized or decentralized
 - 2. Planning and equipment
 - 3. Methods
 - 4. Advantages and disadvantages--each type
- C. Preservation of records
 - 1. Legal requirements
 - 2. Research requirements
 - 3. Microfilming--preparation and type

II. Use of Medical Record

- A. Personal document
 - 1. Current and future illnesses
 - 2. Insurance claims, compensation
 - 3. Proof of age, injury, death
- B. Impersonal document
 - 1. Statistics
 - 2. Research and education
 - 3. Evaluation of patient care
- III. Ownership of Medical Record
 - A. Hospital--record itself
 - B. Patient--content (confidential document)
 - IV. Types of Hospital Medical Records
 - A. In-patient medical records
 - 1. Medical
 - 2. Surgical
 - 3. Obstetrical
 - 4. Specialties

B. Out-patient medical records

- 1. Clinic records
- 2. Emergency room records
- 3. Private out-patients

V. Hospital and Accrediting Agency Requirements

- A. JCAH
- B. State laws
- C. Medical staff bylaws

VI. Analysis of Medical Records

A. Assembling medical record

- 1. Basic requirements
- 2. Typical format
- 3. Special types
- 4. Miscellaneous forms and reports

B. Service assignment

- 1. Definition
- 2. Basic services
- 3. Procedure (diagnosis/service)

C. Quantitative analysis

- 1. Definition and purpose
- 2. Method

VII. Completion of Medical Record

- A. Incomplete reports
- B. Incomplete medical section
- C. Incomplete nursing section

VIII. Compilation of statistics

A. Purpose

- 1. Administrative control of present and future hospital operations
- 2. Medical staff measurement of professional performance
- 3. Accrediting agencies yardstick of hospital effeciency
- 4. Public health services, local and national, source of vital statistics and health problems

B. Types

- 1. Daily census
- 2. Monthly and annual service analysis
- 3. Comparative report of professional performance
- 4. Vital statistics
- 5. Public health communicable reports

C. Sources

- 1. Medical record
- 2. Daily floor census
- 3. Birth, death, and fetal death certificates

D. Tabulation

- 1. Daily discharge service analysis
- 2. Daily census sheets
- 3. Birth and death registers

E. Automatic data processing

- 1. Definition
- 2. Use
- 3. Methods



Medical Record Science III - MRS 303 Credit three hours One lecture, two laboratories per week

An introduction to classification systems and methods of coding and indexing with special instruction in Standard Nomenclature of Diseases and Operations and International Classification of Diseases, Adapted. Laboratory work includes coding and indexing by SNODO and ICDA correlated with a sampling of case retrieval for research.

Course Objectives:

- 1. Acquire a background history of classification systems.
- 2. Acquire a knowledge of the development of SNODO.
- 3. Learn the mechanics of coding by SNODO.
- 4. Learn techniques in indexing.
- 5. Acquire knowledge of development and use of ISC and ICDA.
- 6. Learn the mechanics of coding by ICDA.
- 7. Learn methods of developing disease and operation indexes.

Laboratory Objectives:

- 1. Learn usage of topographic and etiologic disease index of SNODO.
- 2. Code sample diseases and conditions by SNODO.
- Code supplementary and non-diagnostic terms.
 Code sample operations by SNODO.
- 5. Coding problems.
- 6. Practice in indexing SNODO codes.
- 7. Practice in indexing code numbers by dual grouping.
- 8. Practice in cross indexing SNODO code numbers.
- 9. Experience in coding diseases by ICDA.
- 10. Experience in coding operations by ICDA.
- 11. Gain knowledge of indexing equipment.



MRS 303 COURSE OUTLINE

I. Orientation

- A. History of development of disease nomenclature and systems of classification of diseases.
- B. Purpose of standard nomenclature of diseases and operations.
- C. Organization of disease code as a dual system
- D. Organization of operation code as a dual system
- E. History of development and purpose of International Statistical Classification and ICDA

II. The Standard Nomenclature of Diseases and Operations

- A. Introduction
- B. Classification
 - 1. Topographical section
 - 2. Etiological section
 - 3. Nondiagnostic terms
 - 4. Supplementary terms
 - 5. Anesthesia section
 - 6. Use of index
 - Operative procedures
 - 8. Appendix

C. Mechanics for coding

- 1. Master codes and open end codes
- 2. Use of decimal digits with topography and etiology
- 3. Neoplasm codes
 - a. Basic
 - b. Behavior
 - c. Decimal digits
- 4. Use of X and Y
- 5. Similar terms
- 6. Synonymous terms
- 7. Use of instructions and footnotes
- 8. Use of special operative digits
- 9. Special problems (heart, obstetrics) and non-diagnostic terms

III. Indexes

A. Required indexes

- 1. Types
 - a. Patient and index
 - b. Disease index

- c. Operation index
- d. Physician's index
- 2. Purpose
- 3. Content
- 4. Methods

B. Special indexes

- 1. Number index
- 2. Radiology index
- 3. Pathology index
- 4. Anesthesia index
- 5. Tumor index
- 6. Heart index
- 7. Medical illustration index
- C. Value of indexes
- D. Indexing equipment
 - 1. Loose leaf or ledger
 - 2. Visible
 - 3. Vetical
 - 4. Mechanic--electronic

E. Techniques in posting

- 1. Dual grouping
- 2. Grouping by master code
- 3. Class indexing

IV. International Classification of Diseases, Adapted

- A. Mechanics of coding
 - 1. Diseases
 - 2. Operations
 - 3. E codes
 - 4. Other special codes
- B. Indexing methods

Medical Record Science IV - MRS 216 Credit six hours

A supervised summer practical experience in the Medical Record Department of a large hospital with adequate facilities to provide a varied work opportunity in the major aspects of Medical Record Science. Students will work under the supervision of a qualified Record Librarian of the hospital to which they are assigned and will also have frequent college faculty consultation. The program is designed to enable students to obtain actual working experience in procedures studied in the classroom and college laboratory.

Course Objectives:

- 1. Become acquainted with actual working atmosphere of a large Medical Record Department.
- 2. Gain insight into organization and functions of an active hospital Medical Record Department.
- 3. Become aware of the problems of Medical Record personnel.
- 4. Learn to accept responsibilities of the Medical Record Department.
- 5. Gain experience working with other professional and non-professional personnel.
- 6. Develop additional skill in Medical Record procedures under stress of daily working conditions.
- 7. Become acquainted with work flow scheduling in a busy Medical Record Department.
- 8. Acquire further understanding of the need to preserve the confidentiality of the Medical Record.
- 9. Develop flexibility in carrying out various assignments.



MRS 216 COURSE OUTLINE

- I. Practical Experiences Considered Desirable During Supervised Summer Affiliation
 - A. Filing and handling requests
 - B. Admission procedures
 - C. Discharge analysis and statistics
 - D. Coding and indexing with dample research project, if possible
 - E. Transcription
 - F. Miscellaneous duties as needed for substitution of absentee employees

Medical Record Science V - MRS 405 Credit five hours Three lectures, two laboratories per week

An introduction to the medical ethics and the legal aspects of medical records. Special attention is given to authorizations, release of information, and the handling of medical records in court. Laboratory work includes experience in planning and developing forms for authorization and practice in releasing information.

Course Objectives:

- 1. To provide an opportunity for discussion and comparison of organization and procedures used in affiliate hospitals.
- 2. To gain an understanding of the confidential nature of medical information and the medical record.
- 3. Gain an understanding of public relations consistent with correct professional ethics.
- 4. Acquire a knowledge of the most commonly used legal terms.
- 5. Develop an awareness of laws pertaining to medical information.
- 6. Introduce various types of authorization and consent forms with a history of their evolution.
- 7. Acquire a knowledge of the principles involved in the release of medical information.
- 8. Provide guides for the selection of pertinent information from the medical record for release to authorized parties.
- 9. Develop an understanding of court procedure for introducing the medical record as evidence.

Laboratory Objectives:

- 1. Prepare an organization chart and work-flow chart reflecting the affiliate medical record department.
- 2. Practice in handling requests for social and/or medical information found in the medical record and releasing it 'erbally.
- 3. Design various types of consent forms and forms for release of medical information.



Laboratory Objectives (cont'd.):

- 4. Provide an opportunity to check authorizations for release of information.
- 5. Develop skill in preparing abstracts.
- 6. Develop skill in preparing summaries.
- 7. Gain experience in processing a subpoena duces tecum and preparing a medical record for the.
- 8. Provide the students the a facsimile of courtroom procedure and the introduction of the medical record as evidence.
- 9. Practice in releasing information to parties where authorization is not required.

MRS 405 COURSE OUTLINE

I. Summer Hospital Affiliation

- A. Classroom discussion of affiliation--each student presents a 10-minute talk
- B. Private conference with each student to correlate medical record librarian and student's reports.

II. Introduction to Medical Jurisprudence

- A. Definition of medical jurisprudence
- B. Eistory of laws pertaining to hospitals, medical care, and medical records.

III. Property Rights and Medical Ethics

- A. Patient
- B. Hospital
- C. Physician

IV. Legal Terminology

V. Release of Information

A. Authorization

- 1. Insurance company
- 2. Attorney
- B. Subpoena duces tecum
- C. Without authorization
 - 1. Attending physician or coroner
 - 2. Hospital
 - 3. Compensation board
 - 4. News media
 - 5. Folice
 - 6. Immediate family of deceased--autopsy findings

Medical Record Science VI - MRS 505 Credit five hours Three lectures, two laboratories per week

An introduction to additional medical record responsibilities which vary with type of health institution. Included are Specialized Registries as the Tumor Registry, Out-Patient Department, Medical Library, and the role of the Medical Record Department in disaster planning. Comparison of medical record procedures in specialized and/or long-term hospitals and in nursing homes with those in a general hospital. Laboratory includes practice in working with the Tumor Registry, and facisimile experience of working in an Out-Patient Department, Medical Library and Disaster Planning. A field trip to a specialized and/or long-term hospital is included.

Course Objectives:

- 1. Acquire an understanding of specialized registries, and how they assist the follow-up of patients and future research.
- 2. Gain a knowledge of the organization of the Tumor Registry.
- 3. Familiarize the student with out-patient department procedures involving medical records.
- 4. Introduce the fundamentals of medical library science.
- 5. Acquire a knowledge of the role of the medical record department in disaster planning.
- 6. Gain an understanding of medical record requirements in specialized and long-term hospitals.
- 7. Familiarize the student with medical record requirements for nursing homes.
- 8. Introduce the student to the variety of statistical reports prepared for agencies and organizations outside the hospital.

Laboratory Objectives:

- 1. Acquaint the student with forms of the Tumor Registry and Cardiac Registry.
- 2. Gain experience in cataloging Tumor Registry cases.
- 3. Gain experience in follow-up Tumor Registry cases and preparing Tumor Registry reports.

Laboratory Objectives (cont'd.):

- 4. Introduce the out-patient medical record, how it is compiled and filed.
- 5. Procedures for filling out out-patient requests and follow-up.
- 6. Field trip to medical library at a local hospital.
- 7. Prepare a kit for tagging patients in a disaster and review disaster routine.
- 8. Study medical record forms and procedures in specialized and long-term hospitals.
- 9. Organize a medical record file for a nursing home.
- 10. Prepare a report for AHA and JCAH survey, and a PAS report form.

MRS 505 COURSE OUTLINE

I. Special Registries

- A. Purpose
- B. Types
- C. Methods
 - 1. Organization
 - 2. Follow-up procedure

D. Accreditation requirements

- 1. American Cancer Society
- 2. JCAH
- 3. American Heart Association

II. Out-Patient Department

A. Organization

- 1. Types of clinics
- 2. Basic medical record requirements
- B. Correlation with medical record department
- C. Filing methods

III. Medical Reference Library

- A. Organization
 - 1. Card file
 - 2. Accession book

B. Classification of books

- 1. Dewey
- 2. Library of Congress
- 3. Boston Library

C. Inventory of journals

- 1. Card file
- 2. Subscription data

IV. Disaster Plan

- A. Purpose
- B. Procedures for medical record department

- 1. Call system
- 2. Materials required
- C. Coordination with hospital master plan
- V. Long-Term and Specialized Hospitals
 - A. Types
 - B Medical record variations
 - C. Special statistical requirements
 - D. Disease and operative indexes
- VI. Nursing Home Facilities
 - A. Medical record requirements
 - B. Coordination with referring hospital
 - C. Accreditation agency reports
- VII. Special Agency Statistical Reports
 - A. Accreditation forms
 - B. Specialized surveys
 - 1. PAS
 - 2. Others

Medical Record Science VII - MRS 605 Credit five hours Three lectures, two laboratories per week

An introduction to the basic principles of organization and management with special emphasis on the interdepartmental and departmental organization and projects for planning a Medical Record Department, developing departmental personnel policies and in solving departmental organization and personnel problems. Laboratory includes experience in local small hospitals assisting the Head of the Medical Record Department in supervisory duties and gaining further experience in medical record procedures.

Course Objectives:

- 1. Gain knowledge of basic principles of efficient organization of a medical record department and its effect on total patient care.
- 2. Acquire understanding of personnel organization and selection.
- 3. Gain knowledge of value and method of developing departmental procedure manual.
- 4. Gain understanding of supervisory techniques necessary for proper management of a medical record department.
- 5. Acquire understanding of methods of evaluation of medical record department procedures.
- 6. Acquire understanding of interdepartmental cooperation in areas involving medical record procedures.
- 7. Acquire knowledge of functions of medical staff committees that involve the medical record department.
- 8. Become familiar with methods of reporting findings of medical staff committee reviews.

Laboratory Objectives:

- 1. Prepare organization charts for varying size medical record departments.
- 2. Gain experience in planning a new or expanding medical record department.
- 3. Develop a work-flow chart for a medical record department.



Laboratory Objectives (cont'd.):

- 4. Prepare procedure manual for select jobs in a medical record department.
- 5. Gain experience preparing work simplification procedure for medical record department.
- 6. Gain experience selecting medical records for various committee reviews.
- 7. Gain experience in solving personnel and interdepartmental problems.
- 8. Gain experience in affiliate hospital in chart analysis and coding.
- 9. Gain experience in affiliate hospital in management of medical record department and in carrying out a hypothetical research project.

MRS 605 COURSE OUTLINE

I. Organization of Medical Record Department

- A. Building facilities
 - 1. Location
 - 2. Size
 - 3. Layout
- B. Personnel
- C. Equipment
 - 1. Furniture
 - 2. Medical record supplies
- D. Budget

II. Management of Medical Record Department

- A. Organization of authority
 - 1. Organization chart
 - 2. Work-flow chart
- B. Guidelines for personnel organization
 - 1. Job description and analysis
 - 2. Procedure manual
 - 3. Personnel selection and relations
- C. Supervisory functions and techniques
- D. Evaluation of medical record procedures -- work simplification
- E. Professional responsibilities

III. Interdepartmental Relations

- A. Communication
- B. Coordination
- C. Uniformity of basic hospital policies

IV. Medical Staff Committees

- A. Types and functions
- B. Responsibility of medical record department
 - 1. Selection of medical records
 - 2. Attendance
 - 3. Reports

A P P E N D I X I V
"EXTENDED CAMPUS" HOSPITAL CONTRACT

AGREEMENT

THIS AGREEMENT, made this day of, by and between
STATE UNIVERSITY OF NEW YORK, AGRICULTURAL AND TECHNICAL COLLEGE, Alfred, New York
hereinafter referred to as the College, and
, hereinafter referred to as the Hospital,
WITNESSETH:
WHEREAS, said College has established an educational program in Medical Recor
Technology; and
WHEREAS, the College desires to enter into a cooperative arrangement with the
Hospital for the purpose of providing adequate clinical experience for the student
of said education program in Medical Record Technology; and
WHEREAS, the Hospital believes the value of the employment of such students
will add to its operation,
NOW, THEREFORE, in consideration of the mutual covenants and agreements
herein contained, the parties hereto agree as follows:
1. The College assumes the responsibility of preparing the student Medical
Record Technicians, prior to their employment by the Hospital, in the following
areas:
ADMISSIONS:
1. Prepare admission forms
2. Prepare Patient index cards
3. Use patient's register 4. File - patient index cards and record folders
a. Alphabetical
b. Numerica1
c. Soundexd. Terminal digit
DISCHARGES:
1. Assemble medical records
Check with discharge listCompute census days
4. Assign service classification
5. Analyze medical records for deficiencies
6. Prepare daily discharge statistics STATISTICS:
1. Prepare daily census report
2. Prepare monthly statistical reports
3. Compute averages and percentages

CODING 40 INDEXING:

- 1. Code diseases and operations by SNDO
- Index diseases and operations by SNDO
 - a. Dual grouping
 - b. Cross indexing
- 3. Code diseases and operations by ICDA
- 4. Index diseases and operations by ICDA

TRANSCRIPTION AND TERMINOLOGY:

- 1. Transcribe histories, physical examinations, operations, consultations, and operative reports for a variety of medical services.
- 2. Pronounce, spell and interpret medical terms correctly.
- 2. The College will provide a faculty supervisor who will visit the Hospital at least twice during the ten week period of student employment, this visit to be at the convenience of the Hospital Medical Record Department Head.
- 3. The Hospital reserves the right, in its absolute discretion, to refuse its facilities and services to any student who does not meet the professional or other requirements of the Hospital or any appropriate authority controlling and directing said Hospital.
- 4. The College will instruct its students and faculty to respect the confidential nature of all information which they may obtain from patients and records of the Hospital.
- 5. The Hospital agrees to employ subject to Paragraph "3" above, at the existing New York State minimum wage, ____ student(s) for a minimum period of ten weeks between the cessation of the College spring academic quarter and the beginning of the College fall academic quarter.
- 6. The Hospital, in so far as it does not interfere with the normal functioning of the Medical Record Department, agrees to provide experiences for the students in the following areas:
 - a. Filing and handling requests
 - b. Admission procedures
 - Discharge analysis and statistics
 - d. Coding and indexing with sample research project, if possible.
 - e. Transcription
 - f. Miscellaneous duties as needed for substitution for absentee employees

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- 7. The Hospital agrees to assist the program by providing, through its supervisory personnel, bi-weekly evaluations of the said students. The evaluation form to be provided by the College.
- 8. The College agrees the students will be subject to all rules, regulations, and privileges pertaining to regular employees of the Hospital.
- 9. This agreement shall become effective immediately upon execution by the parties and will continue in full force and effect until terminated as hereinafter provided. This agreement may be modified at any time upon the written request of either party with the consent of the other party. This agreement may be terminated at any time by mutual consent of the parties, or it may be terminated by either party upon written notice to the other party as provided in Paragraph "11" of this agreement; such non-consensual termination shall become effective six months after proper notice. In the event of non-consensual termination of this agreement by either party, such termination shall not become effective until the students involved in the cooperative program shall have an opportunity to complete the full experience so long as the cause for the terminations does not fall within the boundaries of Paragraphs "3" and "8" above, despite the fact that this period required for program completion may exceed the six month period established in this Paragraph.
- 10. The parties hereto recognize that, in the performance of this contract, the greatest benefits will be derived by promoting the interests of both parties, and each of the parties does, therefore, enter into this contract with the intention of loyally cooperating with the other in carrying out the terms of this contract and each party agrees to interpret its provisions, insofar as it may legally do so, in such manner as will best promote the interests of both and render the highest service to the public.
 - 11. All notices to parties hereunder must be in writing signed by the party

giving it, and shall be served either personally or by registered mail addressed as follows:

TO THE COLLEGE:

Chairman, Division of Health Technologies State University of New York Agricultural and Technical College Alfred, New York 14802

TO THE HOSPITAL:

or to such other addresses as may be hereafter designated by notice. All notices become effective only when received by the addressee.

12. This agreement constitutes the entire agreement of the parties hereto and all previous communications between the parties, whether written or oral, with reference to the subject matter of this contract, are hereby superseded.

IN WITNESS WHEREOF, the parties hereto have executed this agreement the day and year first above written.

	Chairman,	Division	of	Health	Technologies
•					
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A P P E N D I X V

DESCRIPTION OF SUMMER AFFILIATION

ERIC Fruit Text Provided by ERIC

Description of Summer Affiliation

I. Length of Work-Study Experience

The summer affiliation in a cooperating hospital shall be so scheduled that students will begin the work-study phase the week following termination of the spring quarter on the college campus. The affiliation shall be for a minimum of ten weeks. Inasmuch as the summer phase begins immediately after the termination of the spring quarter, this allows 11 to 13 weeks from the beginning of the experience to the beginning of classes in the fall. This provides an opportunity for an additional one to three weeks of employment after the ten week affiliation, if the hospital and student so desire.

II. Work Experience

A practical work experience, under supervision, in all types of Medical Record procedures previously studied through classroom presentation and initial college laboratory practice is scheduled. Listed below is a suggested rotation schedule:

A. File and request clerk Admissions

1 week

B. Discharge analysis and statistics

3 weeks

C. Coding and indexing Sample research project

2 weeks

D. Transcription-histories, physicals, consultations, discharge summaries, operative reports.

3 weeks

E. Substitution for absentee employee (day-to-day)

1 week

III. Evaluation of Students

The evaluation of the student's progress during the summer workstudy experience will be three-fold.

- A. Bi-weekly evaluation sheet completed by the director of the cooperating hospital Medical Record Department. (A copy of this evaluation form is found on the following page.)
- B. Evaluation by director of Medical Record Technology curriculum resulting from individual conferences at the time of supervisory visits to the cooperating hospitals during the summer affiliation.



EVALUATION OF DIRECTED PRACTICE IN COOPERATING HOSPITAL

NAME	0 F	STUDENT		DATE	
NAME	0F	HOSPITAL			

	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	Poor
Theoretical Knowledge					
Practical Application of Theory					
Types of Experience					
1. Filing and handling requests					
2. Admission procedures					
3. Discharge analysis					
2. Admission procedures 3. Discharge analysis 4. Statistics 5. Coding 6. Indexing					
5. Coding					
6. Indexing					
7. Research project					
8. Transcription					
9. Miscellaneous:					

COMMENTS:

2. Poise 3. Relationship with others 4. Flexibility		Personal Qualities	0005	ADEQUATE	POOR
2. Poise 3. Relationship with others 4. Flexibility	1.	Personal grooming			
3. Relationship with others 4. Flexibility 5. Report wallity	2.	Poise			
4. Flexibility F. Bunctuality	3.	Relationship with others			
E Dungtus litu	4.	Flexibility			
5. Functuality	5.	Punctuality			
6. Professional ethics	6.	Professional ethics			

COMMENTS:



C. Submission of a comprehensive final report of the work-study learning experiences, by each student. This report will also include a daily log of experiences.

IV. Financial Remuneration

In order to preclude competition between the hospitals for the summer affiliation agreement has been made that the salary for the students will be designated as the current New York State minimum wage.

V. Living Accommodations

Each student will be responsible for arranging for their own living accommodations during the summer period. Some of the hospitals have indicated the availability of staff residences for this period.

VI. Selection of Cooperating Hospitals

- A. Hospital must be accredited by the Joint Commission on Hospital Accreditation.
- B. Hospitals are to be situated in large metropolitan areas and should have an annual discharge rate of at least 10,000.
- C. Hospital Medical Record Department must be staffed by qualified medical record personnel.

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A P P E N D I X VI
LIST OF COOPERATING HOSPITALS

Cooperating Hospitals

Binghamton, New York

Our Lady of Lourdes Memorial Hospital

Binghamton General Hospital

Buffalo, New York

Sisters of Charity Hospital

Millard Fillmore Hospital

Edward J. Meyer Memorial Hospital

Mercy Hospital

Deaconess Hospital of Buffalo

Childrens Hospital

Buffalo General Hospital

Rochester, New York

St. Mary's Hospital

Rochester General Hospital

Highland Hospital

Genesee Hospital

Syracuse, New York

Syracuse Memorial Hospital

Crouse-Irving Hospital

St. Joseph's Hospital

APPENDIX VII

RESULTS FROM QUESTIONNAIRES BY HOSPITAL CONTROL GROUPS

ERIC

*Full Task Provided by ERIC

1. How many Medical Record Librarians employed?

•	•			•
	Total	Average		
ĵ. •	Male	Male		
	Female	Female	11.61 %	• • • • •
	•		÷	
/				
· 2.	How many Medical Record			•
	Total	Average	-	
	Male 5	Male	3.93 70	•
•	Female . 92	Female	72.44 7.	
/ 2	Wass mann assess and a short	1 1 1		
3.	How many were contacted?	111		•
	Very many manifold	51	•	
	How many replied?			
	Persentage 45.95 %			
-	rereentage 7.7.75			
1.	Number of Medical Decard	Makaisian masihi wa wati		
4.	number of Medical Record	Technician positions anti	cipated to exist by:	
	1969 //8	1975 207	Total 375	
	1703 _/2-3	1919 6	Total 3	-
5.	Starting Salary:	· 		
<i>)</i> •	Lowest #230.			
•			-	
	Highest 7/14 00		` .	
		, di		κ .
	Average for Total Group	#366		,
	Average for New York St			•
	Average for Each State			
		er and a series of the series		
	Alabama	Kentucky *2.3	North Dakota	• `
	Alaska 383-	Louisiana	Ohio	 .,
	Arizona 8360-	Maine \$35/-	Oklahoma	
	Arkansas	Maryland \$3(8-	Oregon	· · · · · · · · · · · · · · · · · · ·
•	California	Massachusetts 4404.30	Pennsylvania 733	10.25
	Colorado 3.3c-2-	Michigan	Rhode Island 435	
	Connecticut \$350.25	Minnesota	South Carolina	
	Delawar 2	Mississippi	South Dakota	 ,
	Dist. of Columbia	Missouri 7238-	Tennessee	
	Florida \$250 -	Montana	Texas	Martine State .
•	Georgia	Nebraska 435c -	Utah	
	Hewaii	Nevada	Vermont \$\frac{\pi}{2} 2 3	27-
	Idaho	New Hampshire	Virginia	
•	Illinois	New Jersey	Washington	
	Indiana	New Mexico	West Virginia	
	Iowa	New York \$428.50	Wisconsin	-
*	Kansas	North Carolina	Wyoming	
,				
6.	Medical Record Technician			
	Civil Service Rating Rec	quired 26		,
•	Accreditation of A.A.M.I			
	Local or Regional Licens	sing Required 2		-
	•		• •	-

7. Background of present Medical Record Technicians

in proudicate or brosom measure w	2001 # 10CHHICIGHS
Average for:	Total New York
High School Graduates Only	50.9570 44.44 70
Less than 2 Years Post High Sch	1001 25.49 7c
Two-Year College Graduates	12-65%
Four-Year College Graduates and	1 Above 1-96 %
8. Average length of retention of N	Medical Record Technicians on the job
(in month)	Male 10.25
(22 2011)	Female 51.75
	remade
9. College courses desirable for Me	ed. Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
10. Presently	<u>1970</u> <u>Presently 1970</u>
Employed	Employed
X Ray Technicians	125 Biomedical Engineering Tech.
Occupational Therapy Asst. 8.7	1/2 (operating, maintaining, trouble
Medical Lab. Technician 208	218 shooting and repairing Mechanical
Medical Secretary 249	273 electrical and electronic Eqpt.
Surgery Technician ("Scrub"	and instruments used in medicine //25
asst. prep. O.R., pass	Medical Emergency Tech (respond
instruments, care for O.R.	to emergency calls, evaluate the
and equipment, "circulating"	emergencies, take action to reduce
assistant, assist in pre and	the med. hazard to patients,
post surgery patient care,	accompany patients to receiving
assist anesthesiologost,	station, serve as tech. asst. to
observe, record and report	emergency room staff, asst. rescue
selected data associated with surgery.)	personnel with rescue prodedures)
Inhalation Therapy Tech. (handle	Public Health Tech (asst. sanitary
medical gases, use and maintain	engrs. scientists, physicians in
eqpt. associated with inhalation	public health services to gather
therapy, carry out physicians	data, inspect, evaluate public
orders relating to inhalation therapy, 13	health facilities.
	Med. Record Technicians §5
Optician)	pental Auxiliary Tech direct
Offorcram)	$\underline{3}$ asst. to dentist) $\underline{28}$ $\underline{52}$

Civil Service Rating Required

Accreditation of A.A.M.R.L. Required Local or Regional Licensing Required

	A	Y	
7.	Background of present Medical Re	ecord Technicians	
	Average for:	<u>Total</u> <u>New York</u>	
	High School Graduates Only	44.186 % 50 %	** *
	Less than 2 Years Post High Sch	1001 44.1869° 33.339°°	•
	Two-Year College Graduates	9.3 %	
	Four-Year College Graduates and	Above 13.95 % 33.33 %	7 _ë s
8.	Average leagth of metention of M	dedical Record Technicians on the job	٠,
	(in month)		*
	(III monton)		
		Female <u>43.23</u>	`.
9.	College courses desirable for Me	ed. Record Tech. Total %	
	Manual Shorthand		
	Machine Shorthand		
	Typing		,
	Medical Terminology		
	Anat. and Physiol.		•
	Accounting		. •
Ē	Filing		
	Data Processing		*
	Business Law		•
	Mathematics		•
	Machine Duplication		
	Office Machines		
10.	Presently	1970 Presently 19	70
	Employed	Employed	
X-Ray	Technicians	152 Biomedical Engineering Tech.	٠.
Occup:	ational Therapy Asst. 16	35 (operating, maintaining, trouble	
Medic	el Lab. Technician 320	4// shooting and repairing Mechanical	•
Medic	al Secretary /35	202 electrical and electronic Eqpt.	
Surge	ry Technician ("Scrub"	and instruments used in medicine /	12
_	prep. O.R., pass	Medical Emergency Tech (respond	
	ruments, care for O.R.	to emergency calls, evaluate the	`
	equipment, "circulating"	emergencies, take action to reduce	
	stant, assist in pre and	the med. hazard to patients,	, •
	surgery patient care,	accompany patients to receiving	
_	st anesthesiologost,	· · · · · · · · · · · · · · · · · · ·	
	rve, record and report	station, serve as tech. asst. to	•
	eted data associated with	emergency room staff, asst. rescue	
	ery.)	personnel with rescue prodedures)	24
	ation Therapy Tech. (handle	Dublie Weelth Week Joseph Court	24
	cal gases, use and maintain	Public Health Tech (asst. sanitary	
		engrs. scientists, physicians in	
	associated with inhalation	public health services to gather	• ′
-	apy, carry out physicians	data, inspect, evaluate public	•
	rs relating to inhalation	health facilities.	<u> </u>
there		65 Med. Record Technicians 59	<u>97 </u>
Uphtha		Lental Auxiliary Tech direct	, .:
	Optician)	asst. to dentist) 2	<u> </u>
	•		

	How many Medical Record L				
	Total / / /		Average		
	Male 2		Male	13.33%	
	Female /O:		Female	66.66 70	
			_		·
2.	How many Medical Record T	echnicians em	ploved?		
	Total 106		Average		
	Male / C		Male	9.43%	
	Female /4		Female		* *
		•	Lemare -	60-37%	•
3.	How many were contacted?	F0	•		
	now many were contracted:	77	•	•	•
	How many replied?				
	now many repried:	20		•	
	Dammant 22 0 9			•	
	Percentage 33.9%	•	,		¥ X
	•	•	•	•	
4.	Number of Medical Record	rechnician pos	sitions ant	icipated to ex	ist by:
					, - , -, -,
	1969 /25	1975 /6	(0	Total	•

5.	Starting Salary:		• *	^	
_	Lowest \$2/7-		•		* ×
	·	,	. %		•
	Highest #500 -		•		•
				. *,	•
	Acromo en l'Ann Maha 2 Caran	\$ 220	•		٠
	Average for Total Group	<u> </u>	7	•	•
	Average for New York State	te <u>39/-</u>	13	•	•
	. Average for Each State	· · · · · · · · · · · · · · · · · · ·	*****		•
	•				*
	Alabama	Kentucky	•	North Dako	ta
	Alaska	Louisiana		Ohio	\$ 212-
	Arizona	Maine 🔻	242-	Oklahoma	¥ 350
	Arkansas	Maryland #	191-	Oregon	370,-
	California	Massachuset	+ 0/202-		
				Dammaralian	.
	Colorado		, 05 <u>70 J</u>	Pennsylvan	
	Colorado	Michigan	<u> </u>	Rhode Isla	nd
	Connecticut	Michigan Minnesota		Rhode Isla South Caro	nd lina
•	Connecticut	Michigan Minnesota Nississippi		Rhode Isla South Caro South Dako	nd lina
٠	Connecticut	Michigan Minnesota Nississippi Missouri		Rhode Isla South Caro	nd lina
	Connecticut Delaware Dist. of Columbia Florida	Michigan Minnesota Nississippi		Rhode Isla South Caro South Dako	nd lina
	Connecticut Delaware Dist. of Columbia Florida Georgia	Michigan Minnesota Nississippi Missouri		Rhode Isla South Caro South Dako Tennessee Texas	nd lina
	Connecticut Delaware Dist. of Columbia Florida	Michigan Minnesota Nississippi Missouri Montana Nebraska		Rhode Isla South Caro South Dako Tennessee Texas Utah	nd lina
	Connecticut Delaware Dist. of Columbia Florida Georgia	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada		Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont	nd lina
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi	re	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia	nd lina ta
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington	nd lina ta
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Michigan Minnesota Nississippi Missouri Montana Nebraska Nebraska Nevada New Hampshi New Jersey New Mexico	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi	nd lina ta
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada Nevada New Hampshi New Jersey New Mexico New York	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Michigan Minnesota Nississippi Missouri Montana Nebraska Nebraska Nevada New Hampshi New Jersey New Mexico	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi	nd lina ta
	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50 Medical Record Technicians	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50 Medical Record Technicians Civil Service Rating Requi	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50 Medical Record Technicians Civil Service Rating Requi	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol	re #300,-	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Towa Kansas ** 282.50 Medical Record Technicians Civil Service Rating Requirements Accreditation of A.A.M.R.	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol L. Required	re #3co,- ina 2	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas 282.50 Medical Record Technicians Civil Service Rating Requi	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol L. Required	re #3co,- ina 2	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta
6.	Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Towa Kansas ** 282.50 Medical Record Technicians Civil Service Rating Requirements Accreditation of A.A.M.R.	Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada New Hampshi New Jersey New Mexico New York North Carol L. Required	re #3co,- ina 2	Rhode Isla South Caro South Dako Tennessee Texas Utah Vermont Virginia Washington West Virgi Wisconsin	nd lina ta

	Average for:	Total	New York
•	High School Graduates Only	60%	62.5 %
	Less than 2 Years Post High S		1.2.5 %
	Two-Year College Graduate	30 76	50.0 %
	Four-Year College Graduates a		25.0 %
		_balant 0	10
8.	Average length of retention of	Medical Record Technicians	on the job
	(i. month)	Male /5.5	
	·	Female 47.31	
9.	College courses desirable for	Med. Record Tech. Total	5
	Manual Chauthand		
	Manual Shorthand		
	Machine Shorthand		
	Typing		
	Medical Terminology		
	Anat. and Physiol.		
	Accounting		
	Filing		
	Data Processing		
	Business Law	~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Mathematics		
	Machine Duplication		
	Office Machines		
10.	Presently	v 1970	Presently 1970
	Employe		Employed
X-Ra	y Technicians 82	99 Biomedical Engineer	
	pational Therapy Asst. /0	37 (operating, maintain	
	cal Lab. Technician 287	382 shooting and repair	, - ,
	cal Secretary 137	2/3 electrical and elec	T
,	ery Technician ("Scrub"	and instruments use	
_	. prep. O.R., pass	Medical Emergency T	
	truments, care for O.R.	to emergency calls	
	equipment, "circulating"	emergencies, take	
1	istant, assist in pre and	the med. hazard to	
	t surgery patient care,	accompany patients	
_	ist anesthesiologost,	station, serve as	
	erve, record and report	emergency room sta	* * * * * * * * * * * * * * * * * * * *
740	ected data associated with	personnel with res	
sel	gery.)	76	cue prodedures,
			1000
sur	· · · · · · · · · · · · · · · · · · ·	Unblid Health Mean	
sur Inha	lation Therapy Tech. (handle	Public Health Tech	
sur Inha n ed	lation Therapy Tech. (handle ical gases, use and maintain	engrs. scientists,	physicians in
sur Inha med eqp	lation Therapy Tech. (handle ical gases, use and maintain t. associated with inhalation	engrs. scientists, public health serv	physicians in cices to gather
sur Inha med eqp the	lation Therapy Tech. (handle ical gases, use and maintain	engrs. scientists,	physicians in rices to gather luate public

37 Med. Record Technicians Dental Auxiliary Tech. direct asst. to dentist)

therapy,
Ophthalmic Dispensing Tech.
Optician)

1.	now many medical Record	Librarians employed?	
	Total /	Average	
	Male	Male	(1)
	Female	Female	100 %
		-	
2.	How many Madical Basend	Mochniciana anni 10	
٤.	How many Medical Record Total 5	_ · · · · · · · · · · · · · · · · · · ·	
	Male	Average	-
	Female /	Male	
	remerie	Female _	20 %
3.	How many were contacted	3 13	•
	How many replied?	3	•
	Percentage 23.07		
1.	• •		
4.	Number of Medical Recor	d Technician positions anti	icipated to exist by:
	1969 9	1975 /4/	Total
5.	Starting Salary:		
	Lowest <u> </u>		
	# 200		
	Highest <u>4398.</u> -		
	Assemble for Make 7 Course	# 200	
	Average for Total Grou		•
	Average for New York S Average for Each State		
•		er personal de la	
	Alabama #200-	Kentucky	North Dakota
,	Alaska	Louisianá	Ohio
	Arizona	Maine	Oklahoma
	Arkansas	Maryland	
	California	Massachusetts	Oregon
	Colorado	·	Pennsylvania
	Connecticut	Michigan	Rhode Island
	Delaware	Minnesota	South Carolina
	pist. of Columbia	Nississippi	South Dakota
	Florida	Missouri	Tennessee
	· · · · · · · · · · · · · · · · · · ·	Montana	Texas
	Georgia Hawaii #398-	Nebraska	Utah:
		Nevada	Vermont
	Idaho	New Hampshire	Virginia
	Illinois	New Jersey	Washington
	Indiana	New Mexico	West Virginia
	Iowa Kansas	New York	Wisconsin
	<u> </u>	North Carolina	Wyoming
6.	Medical Record Technicia	ans.	
•	'Civil Service Rating Re	equired O	
	Anna 224 a42 a	n • n • • • •	•
	Accreditation of A.A.M.	K.L. Kequired	
	Local or Regional Licer	using RequiredO	

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7. Background of present Medical R	Record Technicions
	cool & lecimidians
Average for:	<u>Total</u> New York
High School Graduates Only	100%
Less than 2 Years Post High Sc	hool 33.33.76
Two-Year College Graduates	
Four-Year College Graduates an	d Above
0	
8. Average length of retention of	Medical Record Technicians on the job
(in month)	Male
	Female 30
9. College courses desirable for M	ed. Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
10 Presently	
Employed	Employed
X-Ray Technicians 12	13 Biomedical Engineering Tech.
Occupational Therapy Asst.	3 (operating, maintaining, trouble
Medical Lab. Technician 47	54/ shooting and repairing Mechanical
Medical Secretary	14 electrical and electronic Eqpt.
Surgery Technician ("Scrub"	and instruments used in medicine
asst. prep. O.R., pass	Medical Emergency Tech (respond
instruments, care for O.R.	to emergency calls, evaluate the
and equipment, "circulating"	emergencies, take action to reduce
assistant, assist in pre and	the med. hazard to patients,
post surgery patient care,	accompany patients to receiving
assist anesthesiologost,	station, serve as tech. asst. to
observe, record and report	emergency room staff, asst. rescue
selected data associated with	personnel with rescue prodedures)
surgery.)	<u></u>
Inhalation Therapy Tech. (handle	Public Health Tech (asst. sanitary
medical gases, use and maintain	engrs. scientists, physicians in
eqpt. associated with inhalation	public health services to gather
therapy, carry out physicians	data, inspect, evaluate public
orders relating to inhalation	health facilities.
therapy,	Med. Record Technicians
Ophthalmic Dispensing Tech.	Lental Auxiliary Tech direct
Optician)	eggt to dontint!

gis E R

Mal	tal		Average Male Female		
How man Tota Male Fema	9	Technicians em	ployed? Average Male Female	71.24 7	, ;;
How man	ny were contacted	16		•	
How man	y replied?	. 3		,	
Percent	age <u>18-25</u> %	•			
Number	of Medical Record	d Technician po	sitions an	ticipated to	exist by:
1969	<u> </u>	1975/	6	Total	
Startin Lowest	ng Salary:				
Highes	st <u>#350-</u>				•
Averag	e for Total Groun	。) 		
Averag	ge for Total Group ge for New York St ge for Each State	300			•
Averag Averag	ge for New York St ge for Each State	tate		North Da	***************************************
Averag Averag Alabam Alaska	ge for New York St ge for Each State	tate Kentucky Louisiana		Ohio	
Averag Averag Alabam Alaska Arizon	ge for New York State na	Kentucky Louisiana Maine		Ohio Oklahoma	
Averag Averag Alabam Alaska Arizon Arkans	ge for New York State na na na	Kentucky Louisiana Maine Maryland		Ohio Oklahoma Oregon	1
Average Average Alabam Alaska Arizon Arkans Califo	ge for New York State na	Kentucky Louisiana Maine Maryland Massachuse		Ohio Oklahoma Oregon Pennsyl	vania
Averag Averag Alabam Alaska Arizon Arkans Califo	ge for New York State na	Kentucky Louisiana Maine Maryland Massachuse Michigan		Ohio Oklahoma Oregon Pennsyla Rhode Is	vania
Average Average Alabam Alaska Arizon Arkans Califo Colora Connec	ge for New York State ge for Each State gas grnia gdo <u>\$\frac{9}{350}\$ geticut</u>	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota	tts	Ohio Oklahome Oregon Pennsylv Rhode Is	vania sland arolina
Averag Averag Alabam Alaska Arizon Arkans Califo Colora Connec Delawa	ge for New York State ge for Each State ga ga gas grnia gdo # 350,- gticut gre	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp	tts	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca	vania sland arolina akota
Averag Averag Alabam Alaska Arizon Arkans Califo Colora Connec Delawa	ge for New York State ge for Each State gas gas grnia gdo <u>\$\frac{35c}{35c}\$</u>	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota	tts	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennesse	vania sland arolina akota
Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist.	ge for New York State ge for Each State gas gas grnia gdo \$\frac{\psi_350_{\chick}}{250_{\chick}}\$ growth of Columbia gas gas gas gas gas gas gas g	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri	tts	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca	vania sland arolina akota
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Fiorid Georgi Hawaii	ge for New York State ge for Each State gas gas grnia gdo 4/350 gticut gre grof Columbia gas gas gas gas gas gas gas gas gas ga	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada	ttsi	Ohio Oklahome Oregon Pennsylv Rhode Is South Couth De Tennesse Texas	vania sland arolina akota
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Fiorid Georgi Hawaii Idaho	ge for New York State ge for Each State gas gas grnia gas grnia gat gat gat gat gat gat gat g	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh	ii	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennessa Utah Vermont Virginia	vania sland arolina akota
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Fiorid Georgi Hawaii Idaho Illino	ge for New York State ge for Each State ge for Ea	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh	ii	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennessa Texas Utah Vermont Virginia Washing	vania sland arolina akota ee
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Florid Georgi Hawaii Idaho Illino Indian	ge for New York State ge for Each State ge for Ea	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh New Jersey New Mexico	ii	Ohio Oklahoma Oregon Pennsylv Rhode Is South Conth Dennesse Texas Utah Vermont Virginia Washing	vania sland arolina akota ee
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Fiorid Georgi Hawaii Idaho Illino	ge for New York State ge for Each State ge for Ea	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh	i ire	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennessa Texas Utah Vermont Virginia Washing	vania sland arolina akota ee
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Florid Georgi Hawaii Idaho Illino Indian Iowa Kansas Medical	ge for New York State ge for Each State ge for Ea	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh New Jersey New Mexico New York North Caro	i ire	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennessa Texas Utah Vermont Virginia Washing Washing	vania sland arolina akota ee
Average Average Average Alabam Alaska Arizon Arkans Califo Colora Connec Delawa Dist. Florid Georgi Hawaii Idaho Illino Indian Iowa Kansas Medical	ge for New York State ge for Each State as as as a sas a s	Kentucky Louisiana Maine Maryland Massachuse Michigan Minnesota Mississipp Missouri Montana Nebraska Nevada New Hampsh New Jersey New Mexico New York North Caro	i ire	Ohio Oklahoma Oregon Pennsylv Rhode Is South Ca South Da Tennessa Texas Utah Vermont Virginia Washing Washing	vania sland arolina akota ee

Average for:	Maka?
High School Graduates Only	Total New York
Less than 2 Years Post High So	chool Jule 35 76
Two-Year College Graduates	
Four-Year College Graduates ar	nd Above 33.33 %
	001000 76
Average length of retention of	Medical Record Technicians on the job
(in month)	Male
	Female 61.5
College courses desirable for M	Med. Record Tech. Total %
Manual Chamble and	
Manual Shorthand	
Machine Shorthand	
Typing Medical Terminology	
Medical Terminology	
Anat. and Physiol. Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
Washed Mushamon	
Presently	1970 Presently
Employed	
y Technicians /5	
pational Therapy Asst. /	4 (operating, maintaining, trouble
cal Lab. Technician 28	42 shooting and repairing Mechanical
cal Secretary 8	17 electrical and electronic Eqpt.
ery Technician ("Scrub"	and instruments used in medicine
. prep. O.R., pass	Medical Emergency Tech (respond
truments, care for O.R.	to emergency calls, evaluate the
equipment, "r rculating"	emergencies, take action to reduc
istant, assist in pre and	the med. hazard to patients,
t surgery patient care,	accompany patients to receiving
ist anesthesiologost,	station, serve as tech. asst. to
erve, record and report	emergency room staff, asst. rescu
Lected data associated with	personnel with rescue prodedures)
gery.)	1416 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
lation Therapy Tech. (handle	Public Health Tech (asst. sanitary
ical gases, use and maintain	engrs. scientists, physicians in
t. associated with inhalation	public health services to gather
rapy, carry out physicians	data, inspect, evaluate public
ers relating to inhalation	health facilities.
rapy,	6 Med. Record Technicians 2
halmic Dispensing Tech.	Lental Auxiliary Tech direct

			*
1.	How many Medical Record 1	Librarians employed?	
	Total 84 Male 3 Female 59	Average Male Female 7	3.57 76 0-23 70
2.	How many Medical Record Total 267 Male 3 Female 180	Technicians employed? Average Male Female	1.12 % -415 %
3.	How many were contacted?	213	
	How many replied?	103	•
	Percentage 48.35 %		
4.	Number of Medical Record	Technician positions antici	pated to exist by:
	1969 338	1975 367	Total
5.	Starting Salary: Lowest #/67		
	Highest \$550-		
	Average for Total Group Average for New York Sta Average for Each State	te <u>363.375</u>	
6.	Alabama Alaska \$\\\ \sigma_{\color}\cdot - \\ Arizona Arkansas \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Kentucky Louisiana #237.50 Maine #225 Maryland #281.25 Massachusetts Michigan #343.50 Minnesota Mississippi Missouri #3/2 Montana #340 Nebraska #303 Nevada #255 New Hampshire New Jersey New Mexico #268.32 North Carolina *225	North Dakota Ohio Oklahoma Oregon Vennsylvania Rhode Island South Carolina Vergon Tennessee Texas Utah Vermont Virginia Washington West Virginia Wasconsin Wyoming VIR
6.	Medical Record Technician Civil Service Rating Requirements		
	Accreditation of A.A.M.R Local or Regional Licens	L. Required 24	

8. Average length of retention of Medical Record Technicians on the job (in month)

Male 32.8

Female 44.9

9. College courses desirable for Med. Record Tech. Total

Manual Shorthand
Machine Shorthand
Typing
Medical Terminology
Anat. and Physiol.
Accounting
Filing
Data Processing
Business Law
Mathematics
Machine Duplication
Office Machines

10. __ Presently 1970 **Employed** X-Ray Technicians *312* Occupational Therapy Asst. Medical Lab. Technician 691 Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care. assist anesthesiologost, observe, record and report selected data associated with surgery.) ~243. Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation

therapy,

Ophthalmic Dispensing Tech.

Opticien)

Biomedical Engineering Tech.

84 (operating, maintaining, trouble
833 shooting and repairing Mechanical
424 electrical and electronic Eqpt.
and instruments used in medicine2/
Medical Emergency Tech (respond
to emergency calls, evaluate the
emergencies, take action to reduce
the med. hazard to patients,
accompany patients to receiving
tation, serve as tech. asst. to
emergency room staff, asst. rescue
personnel with rescue prodedures)

372

Public Health Tech (asst. sanitary engrs. scientists, physicians in public health services to gather data, inspect, evaluate public health facilities. // /3

191 Med. Record Technicians /82 282

Jental Auxiliary Tech direct

2 asst. to dentist) // /4

1.	How many Medical Record	Librarians employed?	
	Total /77 Male Z	Average	
-	Female ///	Male Female	1.129 70 2.21 90
2.	How many Medical Record	Technicians employed?	
	Total <u>195</u> Male 1	Average	
	Female 355	Male Female	1.196 % 59.66 %
3.	How many were contacted?	435	
	How many replied?	228	
	Percentage 52.41.70		
4.	Number of Medical Record	Technician positions anti	cipated to exist by:
	1969 _223	1975 946	Total
5.	Starting Salary:		
	Lowest # 140	•	•
<i>s</i>	Highest <u>4505</u>	di	,
	Average for Total Group	* 3/3.14	•
	Average for New York State Average for Each State	te 8 340.81	
		er medicinaria.	
	Alabama 300-	Kentucky 292.50	North Dakota \$260 -
	Alaska Arizona <u>7295.5</u> 6	Louisiana 230	Ohio <u>\$235-</u>
	Arkansas	Maine \$ 257.18 Maryland \$ 295.66	Oklahoma 7270
	California	Maryland <u>295.66</u> Massachusetts <u>366.45</u>	Oregon <u>345.</u> -
	Colorado 3350	Michigan	Pennsylvania 5 295.64
	Connecticut 339 (6	Minnesota \$ 250	Rhode Island 3 352.00 South Carolina 234 -
	Delaware \$236	Mississippi	South Dakota 9 210.
	Dist. of Columbia	Missouri #225	Tennessee
	Florida 300	Montana	Texas
	Georgia 300	Nebraska	Utah
	Hawaii 320	Nevada	Vermont 308./2
	Idaho	New Hampshire 3/3.50	Virginia \$ 294/12
	Illinois \$242	New Jersey	Washington
	Indiana	New Mexico 7 250 -	West Virginia
	Iowa Kansas	New York North Carolina 302.50	Wisconsin
•			Wyoming
•	Medical Record Technician Civil Service Rating Requirements	s vired /2	
	Accreditation of A.A.M.R Local or Regional Licens:	L. Required 47	
	manage of Hebronar Dregue;	ing Required //	

7. Background of present Medical Red	cord Technicians
Arramana Paus	
Average for:	Total New York
High School Graduates Only	60.96 70 59.72 %
Less than 2 Years Post High Scho	31-14 % 33.33 %
Two-Year College Graduates	21.05 %
Four-Year College Graduates and	Above 10.09 % 15.21 %
	<u> </u>
8. Average length of retention of Me	edical Record Technicians on the job
(in month)	Male (5.5
,, and another the second seco	
	Female 50 9
9. College courses desirable for Med	Paris mut mut a
A. correge compendents for M60	i. Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
Office Machines	
30	
	<u>1970</u> <u>Presently 1970</u>
Employed	Employed
X-Ray Technicians 952	1/30 Biomedical Engineering Tech.
Occupational Therapy Asst. 96	216 (operating, maintaining, trouble
Medical Lab. Technician 2/43	2637 shooting and 1 iring Mechanical
• • • • • • • • • • • • • • • • • • • •	1390 electrical and electronic Eqpt.
Surgery Technician ("Scrub"	and instruments used in medicine 3 159
asst. prep. O.R., pass	
instruments, care for O.R.	Medical Emergency Tech (respond
and equipment, "circulating"	to emergency calls, evaluate the
assistant, assist in pre and	emergencies, take action to reduce
post surgery patient care,	the med. hazard to patients,
	accompany patients to receiving
assist anesthesiologost,	station, serve as tech. acst. to
observe, record and report	emergency room staff, asst. rescue
selected data associated with	personnel with rescue prodedures)
surgery.)	914 66 197
Inhalation Therapy Tech. (handle:	Public Health Tech (asst. sanitary
medical gases, use and maintain	engrs. scientists, physicians in
eqpt. associated with inhalation	public health services to gather
therapy, carry out physicians	data increat englants and definite
orders relating to inhalation	data, inspect, evaluate public
• • • • • • • • • • • • • • • • • • •	health facilities.
	Med. Record Technicians 4/7. 692
	ental Auxiliary Tech direct
Optician) 3	// asst. to dentist) -44 $-7/$

	Average	
Male	Male	
Female2	Female	100 %
, ,		
How many Medical Recor	d Technicians employed?	
Total /	Average	
Male	Male	CONTRACTOR AND ADDRESS OF THE PARTY OF THE P
Female /	Female	100 %
How many were contacted	· *	
•	7	•
How many replied?	2	
Percentage 50 %	,	
Number of Medical Reco	rd Technician positions and	cicipated to exist by:
1969	1975 /0	
	191)	Total
Starting Salary:		'.
Lowest <u>* 368</u>		
Highest <u>\$368</u>		•
•	s 3/5 −	
Average for Total Grou		
•	State 3 368-	
Average for Total Grow Average for New York S Average for Each State	State 3/8-	
Average for Total Grow Average for New York S Average for Each State	Kentucky	North Dakota
Average for Total Grow Average for New York S Average for Each State Alabama Alaska	Kentucky Louisiana	Ohio
Average for Total Grow Average for New York S Average for Each State Alabama Alaska Arizona	Kentucky Louisiana Maine	Ohio Oklahoma
Average for Total Grow Average for New York & Average for Each State Alabama Alaska Arizona Arkansas	Kentucky Louisiana Maine Maryland	Ohio Oklahoma Oregon
Average for Total Grow Average for New York & Average for Each State Alabama Alaska Arizona Arkansas California	Kentucky Louisiana Maine Maryland Massachusetts	Ohio Oklahoma Oregon Pennsylvania
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado	Kentucky Louisiana Maine Maryland Massachusetts Michigan	Ohio Oklahoma Oregon Pennsylvania Rhode Island
Average for Total Grow Average for New York States Alabama Alabama Alaska Arizona Arkansas California Colorado Connecticut	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Nississippi	Ohio Oklahoma Oregon Pennsylvania Rhode Island
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota
Average for Total Grow Average for New York States Alabama Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington
Average for Total Grow Average for New York States Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin

7.	Background of present Medical Re	ecord Technicians	
	Average for:	Total	New York
	High School Graduates Only	50%	50 %
	Less than 2 Years Post High Sch		
	Two-Year College Graduates	CONTRACTOR CONTRACTOR	
	Four-Year College Graduates and	1 Above	• •
			
8.	Average length of retention of M	Medical Record Technicians	on the job
	(in month)	Male	
		Female 48	
	•		
9.	College courses desirable for Me	ed. Record Tech. Total	%
	Manual Shorthand	·	
	Machine Shorthand		·
	Typing		•
	Medical Terminology		
	Anat. and Physiol.		
	Accounting		
	Filing		
	Data Processing		
	Business Law		
	Mathematics		•
	Machine Duplication	•	
•	Office Machines		, ,
10			_ ;• • • •
10.		<u>1970</u>	Presently 1970
r' Dana	Employed	6	Employed
_	Technicians	Biomedical Engineering	- .
_	ational Therapy Asst	(operating, maintain	
		25 shooting and repairing	
	al Secretary ry Technician ("Scrub"	electrical and electrical	
	prep. O.R., pass	and instruments used	
	ruments, care for O.R.	Medical Emergency Te- to emergency calls,	_
	equipment, "circulating"	emergencies, take a	
	stant, assist in pre and	the med. hazard to	
	surgery patient care,	accompany patients	-
_	st anesthesiologost,	station, serve as to	_ :
	rve, record and report	emergency room staf	
	cted data associated with	personnel with resc	
	ery.) /8	9	- procedures,
	ation Therapy Tech. (handle	Public Health Tech (asst. sanitary
	cal gases, use and maintain	engrs. scientists,	
	. associated with inhalation	public health service	
_	apy, carry out physicians	data, inspect, evaluation	· —
	rs relating to inhalation	health facilities.	
ther		9 Med. Record Technicis	ans /
_		Jental Auxiliary Tech dire	
•	Optician)	asst. to dentist?	1 2

North Carolina

Wisconsin

Wyoming

Medical Record Technicians Civil Service Rating Required Accreditation of A.A.M.R.L. Required Local or Regional Licensing Required

Kansas

7. Background of present Medical Record Technicians

	Average for: Total New York
	High School Graduates Only 22.22 %
	Togg then O Years Dock Will Co.
	Two-Year College Graduates 35.55 7. 55.55 7. 33.33 7. 33.33 7.
	Four-Year College Graduates and Above
	8. Average length of retention of Medical Record Technicians on the job
	(in month) Male <u>58.5</u>
	Female 40 -
	9. College courses desirable for Med. Record Tech. Total
•	Manual Shorthand
	Machine Shorthand
	Typing
	Medical Terminology
	Anat. and Physiol.
	Accounting
	Filing
	Data Processing
	Business Law
	Mathematics
	Machine Duplication
	Office Machines
3	O Presently 1970 Presently 1970
	Fresently 1970
. X-	Ray Technicians 43 52 Biomedical Engineering Tech.
	cupational Therapy Asst. 4 (operating, maintaining, trouble
	dical Lab. Technician 142 176 shooting and repairing Mechanical
Me	dical Secretary 59 84 electrical and electronic Eqpt.
Su	rgery Technician ("Scrub" and instruments used in medicine
as	st. prep. O.R., pass Medical Emergency Tech (respond
	nstruments, care for 0.R. to emergency calls, evaluate the
	nd equipment, "circulating" emergencies, tele action to reduce
	ssistant, assist in pre and the med. hazard to patients,
	ost surgery patient care, accompany patients to receiving
	ssist anesthesiologost, station, serve as tech. asst. to
	bserve, record and report emergency room staff, asst. rescue
	elected data associated with personnel with rescue prodedures)
	urgery.) halation Therapy Tech. (handle Public Health Tech (asst. sanitary)
	Francis nontra de la Partici
	nerapy, carry out physicians data, inspect, evaluate public rders relating to inhalation health facilities.
	herapy,
	hthalmic Dispensing Tech. Dental Auxiliary Tech direct
-	
	Optician) asst. to dentist) 9 /2
	Optician) asst. to dentist) 9 12

Alabama Alaska Arizona Arkansas California Massachusetts 335.50 Pennsylvania Colorado Michigan Rhode Island Connecticut Minnesota South Carolina Mississippi Delaware South Dakota bist. of Columbia Missouri Tennessee Florida Montana Texas .Georgia Nebraska **Utah** Havaii Nevada Vermont. Idaho New Hampshire Virginia Illinois New Jersey Washington Indiana New Mexico West Virginia Iowa New York Wisconsin Kansas North Carolina Wyoming

Total

Female _

Male

Total

Female

How many replied?

Starting Salary:

Medical Record Technicians

Civil Service Rating Required

Accreditation of A.A.M.R.L. Required Local or Regional Licensing Required

Male

1969

Lowest

Highest

7. Background of present Medical 1	Record Technicians
Average for: High School Graduates Only Less than 2 Years Post High School Two-Year College Graduates Four-Year College Graduates and	21.07% 16.66 %
8. Average length of retention of (in month)	Medical Record Technicians on the job Male 34.3 Female 42.7
9. College courses desirable for N	Med. Record Tech. Total %
Manual Shorthand Machine Shorthand Typing Medical Terminology Anat. and Physiol. Accounting Filing Data Processing Business Law Mathematics Machine Duplication Office Machines	
10. Presently	1970 Presently 1970
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation therapy.	
Ophthalmic Dispensing Tech. Optician)	Lental Auxiliary Tech direct asst. to dentist) 2 10

6. Medical Record Technicians
Civil Service Rating Required

Accreditation of A.A.M.R.L. Required
Local or Regional Licensing Required

O

7. Background of present Medical Rec	ord Technicians
Average for: High School Graduates Only	Total New York
Less than 2 Years Post High School	
Two-Year College Graduates	
Four-Year College Graduates and	Above
8. Average length of retention of Med	dical Record Technicians on the job
(in month)	Male 24
	Female 36
9. College courses desirable for Med	Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
30 ·	
10. Presently Employed	1970 Presently 1970
X-Ray Technicians	8 Biomedical Engineering Tech.
Occupational Therapy Asst.	(operating, maintaining, trouble
Medical Lab. Technician 23	14 shooting and repairing Mechanical
Medical Secretary 21	1 electrical and electronic Eqpt.
Surgery Technician ("Scrub"	and instruments used in medicine 5
asst. prep. O.R., pass	Medical Emergency Tech (respond
instruments, care for O.R.	to emergency calls, evaluate the
and equipment, "circulating" assistant, assist in pre and	emergencies, take action to reduce
post surgery patient care,	the med. hazard to patients,
assist anesthesiologost,	accompany patients to receiving station, serve as tech. asst. to
observe, record and report	emergency room staff, asst. rescue
selected data associated with	personnel with rescue prodedures)
surgery.)	9 14 9
Inhalation Therapy Tech. (handle	Public Health Tech (asst. sanitary
medical gases, use and maintain	engrs. scientists, physicians in
eqpt. associated with inhalation	public health services to gather
therapy, carry out physicians	data, inspect evaluate public
orders relating to inhalation	2 health facilities. 15
therapy, Ophthalmic Dispensing Tech.	Med. Record Technicians 7 4
Optician)	ental Auxiliary Tech direct
· · · · · · · · · · · · · · · · · · ·	asst. to dentist)/8

	Total /	. Average	
	Male	Male	
	Female /	Female	100
		. Lemare	100 %
	•		
2.	How many Medical Reco	rd Technicians employed?	
	Total 6	Average	
	Male	Male	
	Female	Female	100 %
	*	•	
3.	How many were contact	ed?	,
		,	
	How many replied?	, '	
	- 12 - 0	-	
•	Persentage 12.5	<i>lo</i> .	
1.	3. 1		
4.	Number of Medical Reco	ord Technician positions a	nticipated to exist by:
	· ~	,	
	1969	1975	Total
5	Starting Salary:	•	
/• ;			•
	Lowest <u>268</u>		
	Highest \$ 268		
	mignest EGO		•
	Average for Total Gro Average for New York	State \$ 2/6-	
•	Average for Total Gro Average for New York Average for Each Stat	State \$ 268-	
•	Average for New York	State \$268-	North Dakota
	Average for New York Average for Each Stat Alabama Alaska	State \$268- te Kentucky	North Dakota
	Average for New York Average for Each Stat Alabama	State \$268-	Ohio
	Average for New York Average for Each Stat Alabama Alaska	State \$268- te Kentucky Louisiana	Ohio Oklahoma
	Average for New York Average for Each Stat Alabama Alaska Arizona Arkansas California	State \$268- te Kentucky Louisiana Maine	Ohio Oklahoma Oregon
· .	Average for New York Average for Each Stat Alabama Alaska Arizona Arkansas California Colorado	State \$268- te Kentucky Louisiana Maine Maryland	Ohio Oklahoma Oregon Pennsylvania
	Average for New York Average for Each Stat Alabama Alaska Arizona Arkansas California Colorado Connecticut	State \$268- te Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota	Ohio Oklahoma Oregon Pennsylvania Rhode Island
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Nississippi	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina
	Average for New York Average for Each Stat Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri	Ohio Oklahoma Oregon Pennsylvania Rhode Island
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Nississippi Missouri Montana	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota
•	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Nississippi Missouri Montana Nebraska Nevada	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Medical Record Technic	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin
	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Medical Record Technic Civil Service Rating	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina Required	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin
5.	Average for New York Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Medical Record Technic	Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York North Carolina ians Required M.R.L. Required	Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin

7. Background of present Medical Record Technicians

Average for:	Total	New York
High School Graduates Only	100%	100 %
Less than 2 Years Post High Sch	001 100%	100 %
Two-Year College Graduates	100%	100 %
Four-Year College Graduates and	Above	· · · · · · · · · · · · · · · · · · ·
O American Jamakh ad makankian ad M		
8. Average length of retention of Machine (in month)		on the job
(In month)	Male	
	Female 50 %	
9. College courses desirable for Med	d. Record Tech. Total	% %
Manual Shorthand		• ,
Machine Shorthand		· · · · · · · · · · · · · · · · · · ·
Typing	Y	
Medical Terminology		
Anat. and Physiol.		
Accounting		
Filing		
Data Processing		**************************************
Business Law		
Mathematics		
Machine Duplication		
Office Machines		
		•
10 Presently	1970	Presently 1970
Employed		Employed
X-Ray Technicians	9 Biomedical Engineeri	Employed ng Tech.
X-Ray Technicians Occupational Therapy Asst. Employed 9	9 Biomedical Engineering (operating, maintain	Employed ng Tech. ing, trouble
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Employed 2	9 Biomedical Engineering (operating, maintaing shooting and repairing)	Employed ng Tech. ing, trouble ng Mechanical
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary 2	9 Biomedical Engineeri (operating, maintain shooting and repairi electrical and elect	Employed ng Tech. ing, trouble ng Mechanical ronic Eqpt.
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub"	9 Biomedical Engineering (operating, maintain shooting and repairing) electrical and electrical and instruments used	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass	9 Biomedical Engineeri (operating, maintain shooting and repairi electrical and elect and instruments used Medical Emergency Te	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub"	Biomedical Engineering (operating, maintain shooting and repairing electrical and electrical and instruments used Medical Emergency Testo emergency calls,	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R.	9 Biomedical Engineeri (operating, maintain shooting and repairi electrical and elect and instruments used Medical Emergency Te to emergency calls, emergencies, take a	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating"	Biomedical Engineering (operating, maintain shooting and repairing electrical and electrical and instruments used Medical Emergency Testo emergency calls,	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients,
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and	Biomedical Engineerical (operating, maintain shooting and repairical and electrical and electrical and instruments used Medical Emergency Teto emergency calls, emergencies, take a the med. hazard to	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care,	9 Biomedical Engineeri (operating, maintain shooting and repairi electrical and elect and instruments used Medical Emergency Te to emergency calls, emergencies, take a the med. hazard to accompany patients	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with	Biomedical Engineerical (operating, maintain shooting and repairing) electrical and electrical and instruments used Medical Emergency Teto emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as to	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.)	9 Biomedical Engineeri (operating, maintain shooting and repairi electrical and elect and instruments used Medical Emergency Te to emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as te emergency room staf	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle	9 Biomedical Engineeri (operating, maintain 3 shooting and repairi 3 electrical and elect and instruments used Medical Emergency Te to emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as t emergency room staf personnel with resc	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain	Biomedical Engineerical (operating, maintain shooting and repairing) electrical and electrical and instruments used Medical Emergency Teto emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as the emergency room staff personnel with rescriptions.	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation	9 Biomedical Engineerical (operating, maintain shooting and repairical and electrical and electrical and instruments used Medical Emergency Testo emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as the emergency room staff personnel with rescaled personnel with rescaled public health services.	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in ces to gather
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians	Biomedical Engineerical (operating, maintain shooting and repairing) electrical and electrical and instruments used Medical Emergency Teto emergency calls, emergencies, take at the med. hazard to accompany patients station, serve as the emergency room staff personnel with rescriptions. Scientists, public health service data, inspect, evaluations.	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in ces to gather
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation	9 Biomedical Engineerical (operating, maintain shooting and repairical and electrical and electrical and instruments used Medical Emergency Testo emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as the emergency room staff personnel with rescale Public Health Tech (engrs. scientists, public health servicate, inspect, evaluate the facilities.	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in ces to gather uate public
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation therapy.	9 Biomedical Engineerical (operating, maintain shooting and repairical and electrical and electrical and instruments used Medical Emergency Teto emergency calls, emergencies, take athe med. hazard to accompany patients station, serve as temergency room staff personnel with rescription of the engrs. scientists, public health facilities. Public Record Technicical Public Record Technical Public	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in ces to gather uate public
X-Ray Technicians Occupational Therapy Asst. Medical Lab. Technician Medical Secretary Surgery Technician ("Scrub" asst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation therapy.	9 Biomedical Engineerical (operating, maintain shooting and repairical and electrical and electrical and instruments used Medical Emergency Testo emergency calls, emergencies, take a the med. hazard to accompany patients station, serve as the emergency room staff personnel with rescale Public Health Tech (engrs. scientists, public health servicate, inspect, evaluate the facilities.	Employed ing Tech. ing, trouble ing Mechanical ronic Eqpt. in medicine ch (respond evaluate the ction to reduce patients, to receiving ech. asst. to f, asst. rescue ue prodedures) asst. sanitary physicians in ces to gather uate public

Average for New York State Average for Each State Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis Dist. of Columbia Mis	Ma Fe cians employ Av Ma Fe 6	ed? erage le male To	ted to exist	by:
How many Medical Record Technital Male Female How many were contacted? How many replied? Percentage 3.33% Number of Medical Record Technital Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mist Mist	tucky	ed? erage le male To	ted to exist	by:
How many Medical Record Technital Male Female How many were contacted? How many replied? Percentage 3.33% Number of Medical Record Technital Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mist Mist	tucky	ed? erage le male To	ted to exist	by:
How many were contacted? How many replied? Percentage 3.33% Number of Medical Record Technical Record Record Technical Rec	Av Ma Fer 6 2	erage le male To	•	by:
How many were contacted? How many replied? Persentage 3.33% Number of Medical Record Technical Record Record Technical Rec	Av Ma Fer 6 2	erage le male To	•	by:
Male Female How many were contacted? How many replied? Percentage 3.33% Number of Medical Record Technical Percentage 1975 Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mist Mist	Ma. Fer. 6 2. tucky	ons anticipat	•	by:
How many were contacted? How many replied? Percentage 3.33% Number of Medical Record Technical Record Rec	Fee 6 2 tucky	ons anticipat	•	by:
How many replied? Percentage 3.33% Number of Medical Record Technical Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Alaska Arizona Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Misser Alaska Misser M	tucky	T	•	by:
Percentage 3.33% Number of Medical Record Technical 1969 1975 Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alabama Ken Alabama Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis Dist. of Columbia Mis	tucky	T	•	by:
Number of Medical Record Technical 1969 1975 Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alabama Ken Alaska Nou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis Pist. of Columbia Mis	tucky	T	•	by:
Number of Medical Record Technical 1969 1975 Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Ken Alabama Ken Alaska Marizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis pist. of Columbia Mis	tucky	T	•	by:
Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Alaska Arizona Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Misser Misse	tucky	T	•	by:
Starting Salary: Lowest Highest Average for Total Group Average for New York State Average for Each State Alabama Alabama Arizona Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Misser Mis	tucky		otal	
Highest Average for Total Group Average for New York State Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Migney Misser Misser	tucky			
Highest Average for Total Group Average for New York State Average for Each State Alabama Alabama Arizona Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Migney Misser Miss	tucky			
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Average for Total Group Average for New York State Average for Each State Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Minute Misses Minute Min	tucky			
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Average for New York State Average for Each State Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis Dist. of Columbia Mis	tucky			
Average for New York State Average for Each State Alabama Ken Alaska Lou Arizona Mai Arkansas Mar California Mas Colorado Mic Connecticut Min Delaware Mis Dist. of Columbia Mis	tucky			
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California Mas Colorado Mic Connecticut Min Delaware Nis Dist. of Columbia Mis	yland		regon	
Colorado Mic Connecticut Min Delaware Mis Dist. of Columbia Mis	sachusetts		ennsylvania	· · · · · · ·
Connecticut Min Delaware Nis Dist. of Columbia Mis	higan		ode Island	
Delaware Nis Dist. of Columbia Mis	nesota		outh Carolina	
Dist. of Columbia Mis	sissippi		outh Dakota	
4 14	souri		ennessee	
riorida	tana	·	emiessee Exas	
	raska		ah	· · · ·
Hawaii Nev			ermont	<u> </u>
	Hampshire_		rginia	· · · · · · · · · · · · · · · · · · ·
Il inois New	Jersey		ishington	
	Mexico		st Virginia	
	York	Wi Wi	sconsin	
	th Carolina		oming	
Medical Record Technicians	_			
Civil Service Rating Required	·		•	`
A compare to the contract of the contract of	:	 	•	•
Accreditation of A.A.M.R.L. Rec Local or Regional Licensing Rec	- hariur	<u>. </u>	•	

7. Background of present Medical Record Technicians Average for: High School Graduates Only	
High School Graduates Only	•
High School Graduates Only	Nov. Yout-
	New: York
Less than 2 Years Post High School	***************************************
Two-Year College Graduates	
Four-Year College Graduates and Above	
8. Average length of retention of Medical Record Technicians on the	ne job
(in month) Male	
Female	
	• ,
9. College courses desirable for Med. Record Tech. Total	*
Monney Chanthan 3	
Manual Shorthand	
Machine Shorthand	
Typing Medical Commingles	. ·
Medical Terminology	· · · · · · · · · · · · · · · · · · ·
Anat. and Physiol.	
Accounting Filing	
Data Processing	
Business Law	
Mathematics ————————————————————————————————————	
Machine Duplication	
Office Machines	
10 <u>Presently 1970</u>	Presently 197
Employed	Employed
-Ray Technicians Biomedical Engineering Te	
operating, maintaining.	
ledical Lab. Technician	
ledical Secretary electrical and electronic	
surgery Technician ("Scrub" and instruments used in m	medicine 3
sst. prep. O.R., pass Medical Emergency Tech (r	
instruments, care for O.R. to emergency calls. eval	
and equipment, "circulating" emergencies, take action	
assistant, assist in pre and the med. hazard to patie	nts,
post surgery patient care, accompany patients to re	ceiving
assist anesthesiologost, station, serve as tech.	
observe, record and report emergency room staff, as	st. rescue
selected data associated with personnel with rescue pr	odedures)
The state of the s	sanitary
nhalation Therapy Tech. (handle Public Health Tech (asst.	
nhalation Therapy Tech. (handle Public Health Tech (asst. medical gases, use and maintain engrs. scientists, physi	cians in
nhalation Therapy Tech. (handle Public Health Tech (asst. medical gases, use and maintain engrs. scientists, physical eqpt. associated with inhalation public health services to the services	cians in o gather
medical gases, use and maintain engrs. scientists, physical second with inhalation therapy, carry out physicians public health services to data, inspect, evaluate	cians in o gather
nhalation Therapy Tech. (handle' Public Health Tech (asst. medical gases, use and maintain engrs. scientists, physicapped public health services therapy, carry out physicians data, inspect, evaluate corders relating to inhalation health facilities.	cians in o gather
medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation therapy, Med. Record Technicians	cians in o gather
nhalation Therapy Tech. (handle' Public Health Tech (asst. medical gases, use and maintain engrs. scientists, physicapped public health services therapy, carry out physicians data, inspect, evaluate corders relating to inhalation health facilities.	cians in o gather

	Total 5 Male / / / / / / / / / / / / / / / / / / /		Average Male Female	20 70	
2.	How many Medical Record 7 Total 3 Male Female	lechnicians empl	Average Male	33.33%	
3.	How many were contacted?	12		•	
	How many replied?	2.			
	Percentage 16.66 %	,			
4.	Number of Medical Record	Technician posi	itions ar	nticipated to exis	st by:
	1969	19"; 10		Total	· · · · · · · · · · · · · · · · · · ·
5.	Starting Salary: Lowest 322.	· ·			
	Highest 378				
	Average for Total Group	<u> </u>	. 0		
	Average for New York Sta Average for Each State	te <u>* 377</u>	man anno anno anno anno anno anno anno a		
	Average for Each State Alabama	Kentucky	The second of th	North Dakota	
	Alabama Alaska	Kentucky Louisiana		North Dakota Ohio	***************************************
	Average for Each State Alabama Alaska Arizona	Kentucky Louisiana Maine	***		
	Alabama Alaska Arizona Arkansas	Kentucky Louisiana Maine Maryland	398	Ohio Oklahoma Oregon	***************************************
	Alabama Alaska Arizona Arkansas California	Kentucky Louisiana Maine Maryland Massachusett	398	Ohio Oklahoma Oregon Pennsylvania	
	Alabama Alaska Arizona Arkansas California Colorado	Kentucky Louisiana Maine Maryland Massachusett Michigan	398	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland	
	Alabama Alaska Arizona Arkansas California Colorado Connecticut	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Nississippi	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Nississippi Missouri	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Nississippi Missouri Montana Nebraska	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah Vermont	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshir	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah Vermont Virginia	na
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshir	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah Vermont Virginia Washington	na.
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshir New Jersey New Mexico	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virgini	na.
	Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Dist. of Columbia Florida Georgia Hawaii Idaho Illinois Indiana	Kentucky Louisiana Maine Maryland Massachusett Michigan Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshir	398 :s	Ohio Oklahoma Oregon Pennsylvania Rhode Tsland South Caroli South Dakota Tennessee Texas Utah Vermont Virginia Washington	na.

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7. Background of present Medical Record Technicians

Average	for:	*	Total	New York
High Sch	ool Graduates Only		50 %	100 %
Less tha	n 2 Years Post High So	chool	100%	100 70
	College Graduates		50 %	100 %
Four-Yea	r College Graduates an	id Abov	e 50%	100 %
		.		
8. Average 1	ength of retention of	Medica	1 Record Technicians on	the job
(in mont	h)		le /	
*		Fe	male 16.57	
•				
9. College c	ourses desirable for M	ied. Re	cord Tech. Total	Ž
	Manual Shorthand			
,	Machine Shorthand			
	Typing			
А	Medical Terminology			
	Anat. and Physiol.			
	Accounting			
	Filing	-		
	Data Processing			
	Business Law			
	Mathematics	<u> </u>		
	Machine Duplication			
	Office Machines			
10.	Presently			Presently 1970
	Employed	_ `		Employed
X-Ray Technicia		13	Biomedical Engineering	
Occupational The			(operating, maintaining	
Medical Lab. Te		ं श्रुंस	shooting and repairing	
Medical Secreta		26		
Surgery Technic		•••	and instruments used i	
asst. prep. 0.R		••••	Medical Emergency Tech	
instruments, ca			to emergency calls, e	
and equipment, assistant, ass	· · · · · · · · · · · · · · · · · · ·		emergencies, take act	
post surgery p			the med. hazard to pa	
assist anesthe			accompany patients to	_
observe, recor			station, serve as tec	
	associated with	,	emergency room staff,	
surgery.)	associated with	· . 11 ·	personnel with rescue	prodedures
, ,	apy Tech. (handle		Public Hoolth Wook (on	
	use and maintain	· · :	Public Health Tech (as	
	ed with inhalation	* * * * * * * * * * * * * * * * * * *	engrs. scientists, ph	
	out physicians		public health service data, inspect, evalua	
	g to inhalation		health facilities.	rie hantie.
therapy,		: 3	Med. Record Technician	
Ophthalmic Dispe	ensing Tech	Jente!	L Auxiliary Tech direc	
	cian) -		asst. to dentist)	, , , , , , , , , , , , , , , , , , ,
		, 	and a demotion	
				• •

1.	How many Medical Record	l Librarians employed?	
	Total 8 Male /	Average Male	12.5 %
•	* Emare	Female	12.5 %
2.	How many Medical Record Total /7 Male 2	l Technicians employed? Average Male	11-76 %
	Female 7	Female	41-17 70
3.	How many were contacted	1? 26	
	How many replied?	20	
	Percentage 7/.92 %	5	
4.	Number of Medical Recor	d Technician positions ar	nticipated to exist by:
	1969 24	1975 26	Total
5.	Starting Salary: Lowest 4303	-	,
	Highest #444-		
	Average for Total Grov Average for New York S Average for Each State	State 340.50	
	Alabama	Kentucky	North Dakota
	Alaska	Louisiana	Ohio
	. Arizona	Maine	Oklahoma
	Arkansas	Maryland \$372.50	Oregon
	California	Massachusetts	Pennsylvania
	Colorado	Michigan	Rhode Island * 398,-
	Connecticut 421.	Minnesota	South Carolina
	Delaware 8 444 -	Mississippi	South Dakota
	Dist. of Columbia	Missouri	Tennessee
	Florida	Montana	Texas
	Georgia Hawaii	Nebraska	Utah
	Idaho \$ 4/00	Nevada 3387	
	Illinois	New Hampshire	Virginia
	Indiana	New Jersey	Washington
	Iowa	New Mexico New York	West Virginia
•	Kansas	North Carolina	Wisconsin Wyoming
_			
6.	Medical Record Technici Civil Service Rating R		<u>.</u>
			•
•	Accreditation of A.A.M Local or Regional Lice	R.L. Required	•

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7.	Background	of	present	Medical	Record	Technicians	•
				•	•		•

Average for:	<u>Total</u> New York
High School Graduates Only	26.31% 33.33 %
Less than 2 Years Post High So	thool 21.05 % 16-66 %
Two-Year College Graduates	26.31 % 33.33 %
Four-Year College Graduates an	id Above 3.24 % 16.66 %
•	
8. Average length of retention of	Medical Record Technicians on the job
(in month)	Male 48
	Female <u>54.25</u>
•	
9. College courses desirable for M	led. Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
10. Presently	
Employed	
X-Ray Technicians 3/	25 Biomedical Engineering Tech.
Occupational Therapy Asst. 20	27 (operating, maintaining, trouble
Medical Lab. Technician 185	202 shooting and repairing Mechanical
Medical Secretary 184	142 electrical and electronic Eqpt.
Surgery Technician ("Scrub"	and instruments used in medicine////
asst. prep. O.R., pass	
	Medical Emergency Tech (respond
instruments, care for O.R.	to emergency calls, evaluate the
and equipment, "circulating"	to emergency calls, evaluate the emergencies, take action to reduce
and equipment, "circulating" assistant, assist in pre and	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients,
and equipment, "circulating" assistant, assist in pre and post surgery patient care,	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost,	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.)	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures)
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in public health services to gather
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in public health services to gather data, inspect, evaluate public
and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in public health services to gather data, inspect, evaluate public health facilities.
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and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) Inhalation Therapy Tech. (handle medical gases, use and maintain eqpt. associated with inhalation therapy, carry out physicians orders relating to inhalation	to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in public health services to gather data, inspect, evaluate public health facilities.

Utah

Vermont

Virginia

Washington

Wisconsin

Wyoming

West Virginia

North Carolina Medical Record Technicians Civil Service Rating Required Accreditation of A.A.M.R.L. Required Local or Regional Licensing Required

Nevada

New Hampshire

New Jersey

New Mexico

New York

Hawaii

Idaho

Iowa

Kansas

Illinois

Indiana

'7. Background of present Medical Re-	cord Technicians
Average for:	Total New York
High School Graduates Only	100al new lork
Less than 2 Years Post High Scho	001
Two-Year College Graduates	
Four-Year College Graduates and	Above
8. Average length of retention of Me (in month)	edical Record Technicians on the job Male
, and money	Female
	z emaze
9. College courses desirable for Med	d. Record Tech. Total %
Manual Shorthand	
Machine Shorthand	
Typing	
Medical Terminology	
Anat. and Physiol.	
Accounting	
Filing	
Data Processing	
Business Law	
Mathematics	
Machine Duplication	
Office Machines	
10. Presently	1970 Presently 19
Employed .	Employed
-Ray Technicians	Biomedical Engineering Tech.
ccupational Therapy Asst.	(operating, maintaining, trouble
edical Lab. Technician	shooting and repairing Mechanical
edical Secretary	and referring metal
	electrical and electronic Eqpt.
urgery Technician ("Scrub"	electrical and electronic Eqpt. and instruments used in medicine
urgery Technician ("Scrub"	electrical and electronic Eqpt.
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R.	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating"	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients,
urgery Technician ("Scrub" sst. prep. O.R., pass Instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care,	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost,	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and cost surgery patient care, assist anesthesiologost, observe, record and report	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and cost surgery patient care, assist anesthesiologost, observe, record and report selected data associated with	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and bost surgery patient care, assist anesthesiologost, abserve, record and report selected data associated with surgery.)	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures)
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and cost surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) ahalation Therapy Tech. (handle	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary
urgery Technician ("Scrub" sst. prep. O.R., pass instruments, care for O.R. and equipment, "circulating" assistant, assist in pre and post surgery patient care, assist anesthesiologost, observe, record and report selected data associated with surgery.) ahalation Therapy Tech. (handle medical gases, use and maintain	electrical and electronic Eqpt. and instruments used in medicine Medical Emergency Tech (respond to emergency calls, evaluate the emergencies, take action to reduce the med. hazard to patients, accompany patients to receiving station, serve as tech. asst. to emergency room staff, asst. rescue personnel with rescue prodedures) Public Health Tech (asst. sanitary engrs. scientists, physicians in
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100 101	-	Final Report: A COMPREHENSIVE PROJECT TO DEVELOP A COMPLETE CURRICULUM IN THE AREA OF MEDICAL RECORDS TECHNICIAN Including Guidelines for the				
102		Development of a Two-Year Collegiate Curriculum for Medical Record Technicians.				
103		•				
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6 00 6 01		Medical Record Technician				
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6 03	1	American Association of Medical Record Librarians				
6 04	•	New York State Department of Education				
6 05 6 06	•	Health Technologies				
000	IDENTIFIERS					
6 07	Medical	Record Technol	ogy Pilot P	rogram		
000	ABSTRACT					
800 801	The study res	ports the nation	nal maade i	n the medical record field fo	r nerconnol	
802		The study reports the national needs in the medical record field for personnel with two-year training in medical record technology as reported by 503 hospitals				
803		throughout the United States. In addition, these hospitals also indicated the				
804		types of courses which would be most beneficial to include in a collegiate				
805 806		curriculum for this type of education. A description of a pilot program in				
807		Alfred, New York, is given including the use of an "extended campus" of cooperating hospitals and a simulated medical record room on campus. Guidelines				
808		are included for the development of a two-year collegiate curriculum for Medical				
809	Record Techni	Record Technicians and are closely associated with those established by the				
810 811	•	Education and Registry Committee of the American Association of Medical Record				
812		Librarians. Course descriptions, objectives, and outlines for a two-year course in Medical Record Science are included. A description is given of the				
813		summer affiliation with hospitals that takes place between the first and				
814	•	second years, including the methods of evaluation used during this period.				
815 816				•		
817					•	
818						
819		•				
820		•			•	
821 822		•				